## 2008 FOR PROFIT CORPORATION **ANNUAL REPORT**

## **FILED** Jan 31, 2008 08:00 A Secretary of State **DOCUMENT # P99000016148** 1. Entity Name MAIN CONNECTION HAIR & NAIL SALON INC. Principal Place of Business Mailing Address 15 W. 41 ST 15 W. 41 ST JACKSONVILLE, FL 32206 JACKSONVILLE, FL 32206 CR2E034 (11/05) 01282008 No Chg-P DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-3557265 Not Applicable \$8.75 Additional 5. Certificate of Status Desired П Fee Required 5. Name and Address of Current Registered Agent BRIGHTWELL, STACEY PD DO NOT WRITE 15 W. 41 ST JACKSONVILLE, FL 32206 IN THIS SPACE 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. Signature, typed or printed name of registered agent and little if applicable (NOTE: Registered Agent signature required when reinstating) \$5.00 May Be 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. After May 1, 2008 Fee will be \$550.00 Added to Fees OFFICERS AND DIRECTORS 10. PD ITHE BRIGHTWELL, STACEY NAME STREET ADDRESS 15 W. 41 ST JACKSONVILLE, FL 32206 CITY-ST-7/P U00000806675 TITLE 02/06/08-80050-023 150.00 STREET ADDRESS CITY-ST-ZIP MILE STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS CITY-ST-ZIP TITLE MARKE STREET ADDRESS

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if

SIGNATURE: >