2008 FOR PROFIT CORPORATION **ANNUAL REPORT**

Mailing Address 771 17TH STREET

3. Mailing Address

City & State

Suite, Apt. #, etc.

MIAMI BEACH, FL 33139-4614

the purpose of changing its registered office

9. Election Campaign Financing

TITLE

Trust Fund Contribution.

Delete

Delete

Delete

Country

DOCUMENT #P99000080815

Country

6. Name and Address of Current Registered Agent

OFFICERS AND DIRECTORS

1. Entity Name

ROMA WAXING, INC.

Principal Place of Business

MIAMI BEACH, FL 33139-4614

SCHWARTZ, ROBERT M

102 NORTH SWINTON AVE DELRAY BEACH, FL 33444

8. The above named entity submits

Skonature, typ

FILE NOW!!! FEE IS \$150.00

Due by September 12, 2008

SZPERLING, ROMINA

MIAMI BEACH, FL 331394614

MIAMI BEACH, FL 331394614

GRUPENMAGER, NOEMI

771 17TH STREET

771 17TH STREET

SZPERLING, VANESA

771-17 STREET

the obligations of regist

SIGNATURE

10.

TITLE

NAME

TITLE

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

CITY-ST-ZIP

2. Principal Place of Business - No P.O. Box #

771 17TH STREET

Suite, Apt. #, etc.

City & State

FILED May 16, 2008 8:00 am Secretary of State

05-16-2008 90015 030 ***150.00

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	7.	Name and A	Address of New F	Registered Ag	ent	
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GRU	ture required whee \$5.00 Added 1	May Be o Fees	In accordance	DATE with s. 607.1 not receive t	93(2)(b), the prior	F.S., the notice.
SRU	ture required whee \$5.00 Added 1	May Be o Fees	In accordance corporation did	DATE with s. 607.1 not receive to	93(2)(b), the prior	F.S., the notice.
Financing ion. 11. TITLE NAME STREET ADDRESS	\$5.00 Added I	MAGE n reinstating) May Be o Fees ADDITIONS/C	In accordance corporation did	with s. 607.1 not receive to the control of the con	93(2)(b), the prior OIRECTOR Change	F.S., the notice.

CITY-ST-ZIP MIAMI BEACH, FL 331344614 Delete TITLE TITLE Change Addition NAME-NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP

12. I hereby certify that the information supplied with this filting 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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: 2

ATTACHMENT

May 12, 2008

40102971 #P9900080815

Devona Reynolds Roma Waxing, Inc. 771 17th Street Miami Bch, Fl 33139

Florida Department of State Division of Corporations P.O. Box 1500 Tallahassee, FL 32302-1500

Re: 2008 Annual Report for Roma Waxing, Inc..

Dear Sir/Madam:

Please find enclosed the completed form and fee of \$150.00 to update our company's information. The principal place of business and mailing address has changed.

Please let me know if you have any additional questions.

Sincerely,

Devona Reynolds

Paralegal for Roma Waxing, Inc.

Encis.