## 2008 FOR PROFIT CORPORATION

**FILED** Apr 21, 2008 08:00 A Secretary of State

DOCUMENT # P99000  1. Entity Name PAZARELLA SALON CORPORA		
Principal Place of Business	Mailing Address	
3115 PONCE DE LEON BOULEVARD CORAL GABLES, FL 33134	3115 PONCE DE LEON B CORAL GABLES, FL 3313	

		1115 PONCE DE LEON BOULEVA ORAL GABLES, FL 33134	IRD 			
DO NOT WRITE IN THIS SPACE		04102008         No Chg-P         CR2E034 (11/05)           4. FEI Number 65-0969478         Applied For Not Applicable           5. Certificate of Status Desired         \$8.75 Additional Fee Required	le			
	6. Name and Address of Current Regis	tered Agent				
	Z, SILVIA M 137TH AVENUE 33183			DO NOT WRITE IN THIS SPACE	•	
	named entity submits this statement for the pions of registered agent.	ourpose of changing its registered	office or register	ered agent, or both, in the State of Florida. I am familiar with, and accep	1	
SIGNATURE	Signature, typed or printed name of registered agent and tille	f applicable (NOTE Registered A	gent signature required	red when reinstating) DA1É		
FIL After Ma	E NOW!!! FEE IS \$150.00 ay 1, 2008 Fee will be \$550.00	Election Campaign Financi     Trust Fund Contribution.		5.00 May Be U00000908444 dided to Fees 05/06/08-80030-018 150.00		
10.	OFFICERS AND DIREC	CTORS				
ITLE  IAME  STREET ADDRESS  CITY+ST-ZIP	P MARTINEZ, SILVIA 8745 SW 137TH AVENUE MIAMI, FL 33183					
TITLE NAME STREET ADDRESS DITY-ST-ZIP			DO NOT WRITE			
ITLE NAME STREET ADDRESS SITY-ST-ZIP						
ITLE NAME STREET ADDRESS CITY-ST-ZIP				IN THIS SPACE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP						
ITLE IAME STREET ADDRESS STY-ST-ZIP						
12. I hereby c	certify that the information supplied with this f	ling does not mainly for the exem	notions contained	ed 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 of trustee empowered to expect 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