

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S31605

FILED
Apr 13, 2008
Secretary of State

Entity Name: HIS AND HERS HAIR DESIGN, INC.

Current Principal Place of Business:

501 NORTH ORLANDO AVE.
#209
WINTER PARK, FL 32789

New Principal Place of Business:

Current Mailing Address:

501 NORTH ORLANDO AVE.
#209
WINTER PARK, FL 32789

New Mailing Address:

FEI Number: 59-3051019

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MORRISON, WILLIAM H.
801 ORIENTA AVE
ALTAMONTE SPRINGS, FL 32701 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: CHARBONO, BRENDA,
Address: 390 DIANE CIR
City-St-Zip: CASSELBERRY, FL

Title: VP () Delete
Name: CODDINGTON, JONNIE,
Address: 704 BONGART RD.
City-St-Zip: WINTER PARK,, FL 32292

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: BRENDA CHARBONO

P

04/13/2008

Electronic Signature of Signing Officer or Director

Date