

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S63816

FILED  
Apr 14, 2011  
Secretary of State

**Entity Name:** AMBIANCE BEAUTY SALON, INC.

**Current Principal Place of Business:**

1502 DONNELLY ST.  
#107  
MOUNT DORA, FL 32757

**New Principal Place of Business:**

**Current Mailing Address:**

1502 DONNELLY ST.  
#107  
MOUNT DORA, FL 32757

**New Mailing Address:**

**FEI Number:** 59-3073916

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

COGGINS, ELLEN  
1502 DONNELLY ST.  
107  
MT. DORA, FL 32757 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

**OFFICERS AND DIRECTORS:**

Title: DP  
Name: COGGINS, ELLEN  
Address: 1502 DONNELLY ST.  
City-St-Zip: MT. DORA, FL 32757 US

Title: VP  
Name: SCHULTZ, LAURA L  
Address: 1502 DONNELLY ST SUITE 107  
City-St-Zip: MOUNT DORA, FL 32757

I hereby 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 all other like empowered.

SIGNATURE: ELLEN COGGINS

DP

04/14/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date