

2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P13000090961

Entity Name: BLOW DRY ORLANDO #2 INC.

Current Principal Place of Business:

7380 WEST SAND LAKE ROAD
420
ORLANDO, FL 32819

Current Mailing Address:

705 DELANEY AVE
ORLANDO, FL 32801 US

FEI Number: 46-5262859

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

FONZI, IRENE T ESQUIRE
1402 HIGHWAY A1A
A
SATELLITE BEACH, FL 32937 US

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

Officer/Director Detail :

Title P
Name JARNES, LAWRENCE
Address 7380 WEST SAND LAKE ROAD, SUITE
420
City-State-Zip: ORLANDO FL 32819

Title T
Name JARNES, LAWRENCE
Address 7380 WEST SAND LAKE ROAD, SUITE
420
City-State-Zip: ORLANDO FL 32819

Title VP
Name JARNES, JEANNETTE E
Address 7380 WEST SAND LAKE ROAD, SUITE
420
City-State-Zip: ORLANDO FL 32819

Title S
Name JARNES, JEANNETTE E
Address 7380 WEST SAND LAKE ROAD, SUITE
420
City-State-Zip: ORLANDO FL 32819

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: LAWRENCE JARNES

PRESIDENT

02/25/2015

Electronic Signature of Signing Officer/Director Detail

Date