

2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000138106

Entity Name: FIRST IMPRESSION SALON AND SPA LLC

Current Principal Place of Business:

5641 SE CROOKED OAK AVE
BLDG.1 UNIT B
HOBE SOUND, FL 33455

Current Mailing Address:

5641 SE CROOKED OAK AVE
BLDG.1 UNIT B
HOBE SOUND, FL 33455

FEI Number: APPLIED FOR

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BILODEAU, JULIA C
1425 SW ORIOLE LN
PORT SAINT LUCIE, FL 34953 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

Authorized Person(s) Detail :

Title MGRM
Name BILODEAU, ROBERT LJR
Address 1425 SW ORIOLE LN
City-State-Zip: PORT SAINT LUCIE FL 34953

Title MGRM
Name BILODEAU, JULIA C
Address 1425 SW ORIOLE LN
City-State-Zip: PORT SAINT LUCIE FL 34953

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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: JULIA BILODEAU

MGRM

03/12/2013

Electronic Signature of Signing Authorized Person(s) Detail

Date