2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

Mar 19, 2004 8:00 am Secretary of State DOCUMENT # P99000108346 02-27-2004 90019 029 ***150.00 HAIR RAZORS SALON, INC. Principal Place of Business Maiting Address 3139 SOUTH FLORIDA AVE LAKELAND FL 33803 3139 SOUTH FLORIDA AVE L'AKELAND FL 33803 66406885 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. CR2E034 (11/03) City & State City & State 4. FEI Number Applied For 59-3613767 Not Applicable Country Zip \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent BURNETT, ANNETTE 4538 OLD GOVERNMENT ROAD Street Address (P.O. Box Number is Not Acceptable) LAKELAND FL 33811 City Zip Code 8. The above named entity submits this statement for the pyrpose of changing its registered office or registered agent, or both, in the State of Florida. Lam familiar with, and accept the obligations of registered agent. FILE NOW!!!, FEE JS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS 10. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. TITLE ☐ Delete TITLE ■ Addition NAME. RISING, ANNETTE M NAME STREET ADDRESS 4538 OLD GOVERNMENT ROAD STREET ADDRESS CITY-ST-ZIP LAKELAND FL 33811 CITY-ST-ZP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS Cily-ST-7F CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Addition ☐ Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7P CITY-ST-ZIP TITLE Delete TITLE - Change - - Addition MAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition MALKE NAME STREET ADDRESS STREET ADORESS CITY-ST-ZIP CITY-ST-ZIP TILLE Delete TITLE ☐ Chance ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), 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 or trustee empowered to execute 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 attactment with an address, with all other like empowered. SIGNATURE:

FILED

Atlachment

Department of Health - Vital Statistics
SILITE OF FLORIDA

MARRIAGE RECORD

TIPE IN UPPER CASE

USE BLACK INK

This illegate net valid unless seal of Clerk, Circus in County Court, appears thereon. 606 10885 # p99000108346

THE TANK IN THE REPORT OF THE PROPERTY OF THE

INSTR # 2002182246
BK 05137 PG 1002
RECORDED 10/10/2002 07:39:01 AM
RICHARD M WEISS, CLERK OF COURT
POLK COUNTY
RECORDING FEES 0.00
RECORDED BY T Reed

2002103108 PLICATION NUMBER) 2. DATE OF BIRTH (Month, Day, Year) GROOM'S NAME (First, Middle, Last) **DANIEL CESAN RISING** 09/13/1966 4. BIRTHPLACE (State or Foreign Country) S. RESIDENCE - CITY, TOWN, OR LOCATIO 3b. COLINTY 3c STATE LAKELAND POLK **FLORIDA MASSACHUSETTS** Sh. MAIDEN SURNAME (II different). e BRIDE'S NAME (Firet, Middle, Leet) B. DATE OF BIRTH (Month, Day, Year) ANNETTE MARIE BURNETT ANDRLIK -- -- 05/08/1963a. RESIDENCE - CITY, TOWN, OR LOCAT 8. BIRTHPLACE (State or Foreign Country) 76. COUNTY 7c. STATE ILLINOIS **LAKELAND POLK** FLORIDA THE APPLICANTS NAMED IN THIS CERTIFICATE, EACH FOR HIMSELF OR HERSELF, STATE THAT THE INFORMATION PROVIDED ON THIS RECORD IS CORRECT TO THE BEST OF OUR KNOWLEDGE AND BELIEF, THAT NO LEGAL OBJECTION TO THE MARRIAGE OR THE ISSUANCE OF A LICENSE TO ALITHOR E.SAME IS KNOWN TO US AND HEREBY APPLY FOR LICENSE TO MARRY. 10. SUBSCRIBED AND SWORN TO BEFORE ME ON (DATE) 09/23/2002 12. SIGNATURE OF OFFICIAL JUSE black ink BEFORE ME ON (DATE RIDE (Sign full name #5)no.btack-ink) 09/23/2002 Deputy LICENSE TO MARRY AUTHORIZATION AND LICENSE IS HEREBY GIVEN TO ANY PERSON DULY AUTHORIZED BY THE LAWS OF THE STATY OF FLORIDA TO PERFORM I MARRIAGE CEREMONY WITHIN THE STATE OF FLORIDA AND TO SOLEMNIZE THE MARRIAGE OF THE ABOVE NAMED PERSONS. THIS LICENSE MUST ON OR AFTER THE EFFECTIVE DATE AND ON BEFORE THE EXPIRATION DATE IN THE STATE OF FLORIDA IN ORDER TO BE RECORDED AND VALID UNO LICENSE 16. DATE LICENSE ISSUED 184. DATE LICENSE EFFECTIVE 19. EXPIRATION DATE Polk Co 09/26/2002 09/23/2002 11/25/2002 ntv 20c. BY D.C. 20s. SIGNATE E DI COURT CLERK OR JUDGE 20b. TITLE Clerk of Circuit Court CAS CERTIFICATE OF MARRIAGE AT THE ABOVE NAMED GROOM AND BRIDE WERE JOINED BY ME IN MARRIAGE IN ACCORDANCE WITH THE LAWS OF THE STATE OF FLORIDA MGE (Month, Day, Year) 22. CITY, TOWN, OR LOCATION OF MARRIAGE PERSON PERFORMING CEREMONY (Use black ink) 23b. NAME AN TITLE OF PERSON PERFORMING CEREMONY Minister ATION BELOW FOR USE BY VITAL STATISTICS ONLY - NOT TO BE RECORDED

thereby certify this is a true and correct copy of the good on the in this office.

RICHARD M. VEISG. CLERK OF COURTS

BY:

Deputy Clerk

OCT 1 2007