2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 26, 2000 8:00 am
Secretary of State
01-26-2000 90201 009 ***150.00

907142

DO NOT WRITE IN THIS SPACE

DOCUMENT # L39075

1. Entity Name

SALON 230, INC.

Principal Place of Business	Mailing Address
116 MAGNOLIA AVE DAYTONA BEACH FL 32114	116 MAMGNOLIA AVE. DAYTONA BEACH FL 32114 US

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	116 Magnolia Ave Suite, Apt. #, etc.
City & State	City & State: Daytona Beach Fl.
Zip / Country	Zip: 32114 / Country: Volusia

4. FEI Number 59-2989608 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

DOYLE, GLENNA
230 BEACH STREET, #102
DAYTONA BCH FL 32114

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City **FL** Zip Code

8. 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 _____ DATE

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW!!! FEE IS $150.00
After MAY 1, 2000 Fee will be $550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS			12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P DOYLE, GLENNA 230 S. BEACH ST.#102 DAYTONA BEACH FL	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition P Doyle, Glenna 118 Magnolia Ave Daytona Beach Fl./32114
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V MASON, TODD 230 S. BEACH ST.#102 DAYTONA BEACH FL	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition V Mason, Todd 116 Magnolia Ave, Daytona Beach Fl, 32114
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S DOYLE, MARGARET 3606 S. PENINSULA, #212 PORT ORANGE FL	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition S ~~Doyle, Margaret~~
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition

13. I hereby certify that the information supplied with this filing 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Glenna Doyle 1-20-00 904-258-5223

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #