

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 15, 2001 8:00 am
Secretary of State

05-15-2001 90097 036 ***150.00

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DOCUMENT # P98000037756

1. Entity Name
HAIR CLUB FOR MEN, LTD., INC.

Principal Place of Business Mailing Address
1515 SOUTH FEDERAL HIGHWAY #401 **1515 SOUTH FEDERAL HIGHWAY #401**
BOCA RATON FL 33432 **BOCA RATON FL 33432**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 3. Mailing Address
 Suite, Apt. #, etc. Suite, Apt. #, etc.
 City & State City & State

4. FEI Number **13-2867772** Applied For
 Not Applicable

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

6. Name and Address of Current Registered Agent
CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE FL 32301-2525

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, 2001 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	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPRD DECARLO, FRANK J 1515 S FEDERAL HWY 401 BOCA RATON FL 33432 <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P SPERLING, SEYMOUR 1515 S FEDERAL HWY STE 401 BOCA RATON FL 33432 <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S SPERLING, AMY 1515 S FEDERAL HWY STE 401 BOCA RATON FL 33432 <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	COD TAPPLY, SUSAN 1515 S FEDERAL HWY 401 BOCA RATON FL 33432 <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CFO HALL, NICHOLAS 1515 S FEDERAL HWY 401 BOCA RATON FL 33432 <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPO RYERSON, GREG 1515 S FEDERAL HWY 401 BOCA RATON FL 33432 <input checked="" type="checkbox"/> Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CE O& Director <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition deslie E martin 1515 S Federal Hwy Boca Raton, FL 33432
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Susan Tappley Fox <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition President & CEO 1515 S Federal Hwy Boca Raton, FL 33432
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Harold Baker <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition VPO general manager 1515 S Federal Hwy Boca Raton, FL 33432
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CFO <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition Deeyff Porter 1515 S Federal Hwy Boca Raton, FL 33432
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Geogey Ryerson <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition VPO operations 1515 S Federal Hwy Boca Raton, FL 33432
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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: _____ Date: **4/30/01** Daytime Phone #: **8613617600**
SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (10/00)