

**2024 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P22000033054

**Entity Name:** MADEZ FLARE CURLS, S CORP

**Current Principal Place of Business:**

7750 OKEECHOBEE BLVD  
4-935  
WEST PALM BEACH, FL 33411

**Current Mailing Address:**

7750 OKEECHOBEE BLVD  
4-935  
WEST PALM BEACH, FL 33411

**FEI Number:** 87-3035603

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

ESTRIplet, MARCUSE D  
5160 FOXHALL DR N  
WEST PALM BEACH, FL 33417 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 MGR  
Name ESTRIplet, MARCUSE D  
Address 5160 FOXHALL DR N  
City-State-Zip: WEST PALM BEACH FL 33417

Title FOUNDER  
Name ESTRIplet, MARCUSE  
Address 7750 OKEECHOBEE BLVD  
4-935  
City-State-Zip: WEST PALM BEACH FL 33411

Title AUTHORIZE MEMBER  
Name ESTRIplet, SAMUEL  
Address 5280 STACY STREET  
B  
City-State-Zip: WEST PALM BEACH FL 33417

*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:** ESTRIplet, MARCUSE D

**MANAGER**

**04/03/2024**

Electronic Signature of Signing Officer/Director Detail

Date