

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION

FOR

REINSTATEMENT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

APPROVED
AND
FILED

Page 1 of 2

DOCUMENT #

G48507

1. Corporation Name

KISSIMMEE BEAUTY SCHOOL, INC.

1996 Annual Report

Principal Place of Business

Mailing Address

508 BROADWAY
KISSIMMEE FL 34744

508 BROADWAY
KISSIMMEE FL 34744

96 OCT -4 AM 9:56

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



200001977852--9

-10/16/96--01126--003

***233.75 ***233.75

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida

07/13/1983

5. FEI Number

59-2291211

Applied For

Not Applicable

6.

CERTIFICATE OF STATUS DESIRED ☒

\$8.75 Additional Fee required
for a Certificate of Status

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	4 City / State / Zip
PD	OGLESBY, JAMES E	307 S. CLYDE AVE	KISSIMMEE FL
SD	OGLESBY, T.N., JR	704 HOLLY DR. N.W. 658 Tommy Aaron Dr.	GAINESVILLE GA
VDT	OGLESBY, JEAN	307 S CLYDE AVE	KISSIMMEE FL

8. Name and Address of Current Registered Agent

OGLESBY, JAMES E.
307 S. CLYDE AVE.
KISSIMMEE FL 34741

9. Name and Address of New Registered Agent

Name

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

Suite, Apt. #, Etc.

City

State
FL

Zip Code

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S.

Signature of
Registered Agent

James E. Oglesby
REGISTERED AGENT MUST SIGN

Date

27 Sept 96

11. Does this corporation pay any intangible tax to the
Dept. of Revenue under S. 199.032, Florida Statutes. Yes ☐ No ☒

(See other side for information
on intangible tax.)

12. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JEAN E. OGLESBY JEAN E. Oglesby

9/27/96

Date

Daytime Phone #

(407) 846-6377

CR2ED40 (7/96)



KISSIMMEE BEAUTY SCHOOL

508 NORTH BROADWAY STREET
KISSIMMEE, FLORIDA 34744
(407) 848-8377

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September 27, 1996

Division of Corporations
Annual Report/Reinstatement Section
P.O. Box 6327
Tallahassee, Florida 32314-6327

To Whom It May Concern:

Enclosed, please find check # 2386 in the amount of \$233.75. This is a replacement for check #2331 in the amount of \$233.75 mailed July 19, 1996. Apparently, it was not received as it hasn't come back through the bank, and you do not have a record of it.


I called this week and spoke with Sean who told me to fill out the reinstatement form and send it with the replacement check for the original amount.

Thank you so much for your patience and attention. I was unaware that there was a problem until I received the Reinstatement Notice. If you have any questions, I will be happy to assist you in any way possible.

Should check #2331 come to your office, would you please return it to me.

Thank you for your time.

Sincerely,


Jean E. Oglesby
Owner