

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # *G 70528*

1. Entity Name

Helene's Inc.

FILED
Jul 02, 2002 8:00 am
Secretary of State

07-02-2002 90813 043 ***150.00

DO NOT WRITE IN THIS SPACE

80126758

2. Principal Place of Business <i>Helene's Inc.</i>		3. Mailing Address <i>Same</i>	
Suite, Apt. #, etc. <i>3665 E. Bay Dr. - Suite 204-144</i>		Suite, Apt. #, etc.	
City & State <i>Largo FL</i>		City & State	
Zip <i>33771</i>	Country <i>U.S.A.</i>	Zip	Country

DO NOT WRITE IN THIS SPACE

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7. Name and Address of Current Registered Agent

Name <i>Karen Mancuso</i>
Street Address (P.O. Box Number is Not Acceptable) <i>3665 E. Bay Dr. - Suite 204-144</i>
City <i>Largo</i>
FL Zip Code <i>33771</i>

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

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

**January 1 - May 1 Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$61.25**

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 <i>PVT Karen Mancuso 3665 E. Bay Dr. - Suite 204-144 Largo, FL 33771</i>	TITLE NAME STREET ADDRESS CITY - ST - ZIP
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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 on an attachment with an address, with all other like empowered.

SIGNATURE:

Karen Mancuso, Pres. Karen Mancuso 6-29-02

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034B (12/01)

Attachment



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State

June 24, 2002

KAREN MANCUSO
3665 E. BAY DRIVE
SUITE 204-144
LARGO, FL 33771 US

SUBJECT: HELENE'S, INC.
Ref. Number: G70528

Pursuant to our telephone conversation of June 24, 2002, I am enclosing a blank uniform business report.

TO AVOID THE \$400.00 LATE FEE, PLEASE RETURN THE CORRECTED REPORT TO: DIVISION OF CORPORATIONS, P.O. BOX 1500, TALLAHASSEE, FLORIDA 32302-1500 WITHIN 30 DAYS OF THE DATE OF THIS LETTER.

If you have any questions concerning the filing of your document, please call (850) 245-6059.

Michelle Milligan
Document Specialist

Letter Number: 102A00040474