

FILED
Mar 01, 2000 8:00 am
Secretary of State
03-01-2000 90081 018 ***150.00

00020133



DOCUMENT # G99083

1. Entity Name

SALON 41 HAIR DESIGN, INC.

Principal Place of Business

456 ARTHUR GODFREY ROAD
BEACH FL 33140-3504

Mailing Address

456 ARTHUR GODFREY ROAD
MIAMI BEACH FL 33140-3504

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

ZipCountry

3. Mailing Address

Suite, Apt. #, etc.

City & State

ZipCountry

6. Name and Address of Current Registered Agent

BARRETT, WILLIAM J.
440 NE 52ND ST.
MIAMI FL 33137

Name

Street Address

City

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required)

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

11. OFFICERS AND DIRECTORS

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

PD
BARRETT, WILLIAM J.
440 NE 52 ST
MIAMI FL

☐ Delete

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

STD
RODRIGUEZ, EDUARDO
411 NE 52 TERR
MIAMI BEACH FL

☐ Delete

TITLE

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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 609.1 of the Florida Statutes, and that the information is true and accurate and that my signature shall have the effect of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 609, F.S., changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE

[Signature]

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR