

FILED
Jun 16, 2003 8:00 am
Secretary of State

5/3

05-30-2003 90082 033 ***150.00

**2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # J15469

1. Entity Name
POSH FOR HAIR, INC.



Principal Place of Business
**271 S. OCEAN BLVD.
MANALAPAN, FL 33462**

Mailing Address
**271 S. OCEAN BLVD.
MANALAPAN, FL 33462**

55048434

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

58-2694280

☒ Applied For

☐ Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**BURLISON, EDYTHE
3610 S. OCEAN BLVD.
SOUTH PALM BEACH, FL 33400**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

NOTE: Registered Agent Signature required when necessary.

DATE

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE **P** ☐ Delete
NAME **RYDLAN, KUKHI**
STREET ADDRESS **1302 LAKE AVE.**
CITY-STATE-ZIP **LAKE WORTH, FL 33461**

TITLE **VP** ☐ Delete
NAME **BURLISON, EDYTHE**
STREET ADDRESS **3610 SOUTH OCEAN BLVD.**
CITY-STATE-ZIP **SOUTH PALM BEACH, FL**

TITLE **S** ☐ Delete
NAME **SALIA, PAM**
STREET ADDRESS **401 BRAZILIAN AVE**
CITY-STATE-ZIP **PALM BEACH, FL**

TITLE **S** ☐ Delete
NAME **BURLISON, RICHARD**
STREET ADDRESS **3656 S. OCEAN BLVD**
CITY-STATE-ZIP **SOUTH PALM BEACH, FL 33400**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-STATE-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE ☐ Change ☐ Addition
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TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-STATE-ZIP

12. 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 person or trustee empowered to execute this report as required by Chapter 807, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Edythe Burlison
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/28/03

(561) 582-4447

Date

Daytime Phone #

CH2E034 (10/02)

Attachment #

May 28, 2003

55048434

[REDACTED]

J15469

Florida Department of State
Division of Corporations
409 E. Gaines Street
Tallahassee, FL 32399

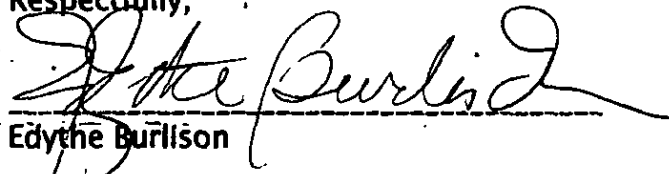
RE: 2003 Uniform Business Report
Posh for Hair, Inc. FEI #59-2694280

Dear Sir, Madam,

I am contacting you regarding fees due for 2003 Uniform Business Report for Posh for Hair, Inc. . I have been in contact with a gentleman named Patrick in your employ who has been looking into this matter for me. At present, he cannot tell me much, other than wait until the State has completed its file updating to verify if my renewal has been received.

Posh for Hair's business files are in the hands of the bookkeeper/accountant who at this time cannot verify if the renewal form for 2003 has been completed. At this time, I am submitting another Uniform Business Report form along with my check for the \$150.00. Please contact me when you are in receipt of this letter.

Respectfully,



Edythe Burlison

Posh-for-Hair, Inc.
271 South Ocean Blvd.
Manalapan, FL 33462

Salon (561) 582-4447
Residence (561) 588-3418