

# FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L53106

1. Entity Name

Le Shoppe Coiffures Inc.



FILED

04 NOV -4 PM 12:14

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**DO NOT WRITE IN THIS SPACE**

2. Principal Place of Business

1615 CYPRESS DR.

Suite, Apt. #, etc.

3. Mailing Address

1615 CYPRESS DR.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State  
Jupiter Florida

City & State  
Jupiter Florida

4. FEI Number

65-0183459

Applied For

Not Applicable

Zip  
33469

Country  
U.S.A.

Zip  
33469

Country  
U.S.A.

5. Certificate of Status Desired

\$8.75 Additional  
Fee Required

7. Name and Address of Current Registered Agent

Name  
John Mellusi

Street Address (P.O. Box Number is Not Acceptable)  
1615 CYPRESS DR.

City  
Jupiter

FL

Zip Code  
33469

**DO NOT WRITE  
IN THIS SPACE**

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

*John Mellusi*

10-20-04

Signature of agent of principal name of registrant must accompany registration.

(NOTE: Registered Agent signature required when registration.)

DATE

9. Election Campaign Financing  
Trust Fund Contribution.

\$5.00 May Be  
Added to Fees

## 10. OFFICERS AND DIRECTORS

TITLE  
NAME  
STREET ADDRESS  
CITY- ST- ZIP  
President  
John Mellusi  
192 Shelter Ln Jupiter FL  
33469

TITLE  
NAME  
STREET ADDRESS  
CITY- ST- ZIP  
100042164031  
10/25/04--01080--018 \*\*150.00

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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 112.07(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 10 or on an attachment with an address, with all other like empowered.

SIGNATURE:

*John Mellusi* John Mellusi

10-20-04

Date

561-746-7750

Company Phone #

COPY TO BUSINESS

10-20-04

Florida Department of State,

I apologize for failing to file my 2004 annual report.

If I received my annual report in the mail, I must have misplaced it or it accidentally got thrown away.

It is out of character for me to neglect something so important.

Thank You

John Mellusi

John Mellusi

Owner of Le Shoppe Coiffures Inc.

1615 Cypress Dr

Jupiter Fl 33469

(561)-746-7750