## 2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

## Aug 30, 2005 8:00 am Secretary of State DOCUMENT # L74896 1. Entity Name 07-19-2005 90038 035 \*\*\*150.00 ACCENT ON BEAUTY, INC. Mailing Address Principal Place of Business 1841 ENGLEWOOD RD. ENGLEWOOD FL 34223 1841 ENGLEWOOD RD. ENGLEWOOD FL 34223 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E034 (10/04) 4. FEI Number City & State City & State Applied For 65-0188423 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent KLINGBEIL, ROBERT Street Address (P.O. Box Number is Not Acceptable) 341 VENICÉ AVE. WEST **VENICE FL 34285** City 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, typed or printed name of nigistered agent and title it applicable (NOTE: Registered Agent signature required whith reunstaining) DATE FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Bo After May 1, 2005 Fee Will Be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS 10. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE ☐ Defete TITLE HELLER, ROSEMARY NAME NAME 1823 ENGLEWOOD ROAD STREET ADDRESS STREET ADDRESS ENGLEWOOD FL CITY-ST-ZIP CITY-S1-ZIP TITLE Delete TITLE ☐ Change ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete TITLE ☐ Change Addition NAMÉ NAME STREET ADDRESS STREET ADORESS CHY-SI MP CITY-ST-ZIP TITLE ☐ Delete TIME ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-S1-7/P CHY-ST-ZIP TITLE ☐ Delete ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-7P CIJY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME SCREET ADDRESS STREET ADDRESS OIY-SI-7/P supplied with this filing does not qualify for the exemption stated in Section 119.07(3Xi), Florida Statutes. I further certify that the information intal report is true and accurate and that my signature shall have the same legal effect as if made under cath; that I am an officer or director trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if 12. I hereby certify that the information indicated on this report or su of the corporation or the recchanged, or on an attacl SOMORY Heller SIGNATURE:

FILED

ATTACHLENT

ACCENT ON BEAUTY, INC. 1841 ENGLEWOOD ROAD ENGLEWOOD, FL 34223 941-475-3515

Florida Department of State Division of Corporations P.O. Box 1500 Tallahassee, FL 32302-1500

## Gentlemen:

έ

As president of this corporaton I received your leter dated July 22, 2005 (#L74896) advising that I owe \$400 "late fee" for my corporation report. I am shocked! As soon as I received your first notice I called your office to advise that I did not receive any notice for filing and paying. As soon as I received the form you sent I paid it

I am a widow and am 6 trying to run this small business since May 1990 with four or six part-time employees. I receive four or five thousand dollars a year for full-time work here. I am on limited social security income and have no other substantial resources. Your "late fee" is a serious burden to me at this time.

Your records will shown that I have always paid all the fees and taxes on a timely basis and maintain the premises well. Please consider this past record and eliminate the late fee since I have paid the regular amount.

Very truly yours,

Mrs. Rosemary Heller