

# 2001 UNIFORM BUSINESS REPORT (UBR)

0007822 AF

DOCUMENT # L99000000326

1. Entity Name  
ARCOS INTERNATIONAL HAIR DESIGN, LLC

Principal Place of Business  
1387 S. ANDREWS AVE.  
POMPANO BEACH FL 33069

Mailing Address  
1387 S. ANDREWS AVE.  
POMPANO BEACH FL 33069

APPROVED  
AND  
FILED

01 FEB -2 PM 2:53

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number 65-0897073

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

WITTMANN, ERICH W  
1440 S. OCEAN BLVD., 7C  
POMPANO BEACH FL 33062

Name KEVIN A. MAGGS

Street Address (P.O. Box Number is Not Acceptable)  
1387 SW 12 AVENUE

City POMPAHO BEACH FL Zip Code 33069

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]* KEVIN A. MAGGS MANAGING MEMBER 1/30/2001  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS \$50.00  
Make Check Payable to Department of State

500003662675--7  
-02/08/01--01120--019  
\*\*\*\*\*50.00 \*\*\*\*\*50.00

9. MANAGING MEMBERS/MEMBERS

10. ADDITIONS/CHANGES

TITLE MGRM  
NAME WITTMAN, ERICH W  
STREET ADDRESS 1440 S. OCEAN BLVD., 7C  
CITY-ST-ZIP POMPAHO BEACH FL 33062 ☒ Delete

TITLE MGRM  
NAME MAGGS, KEVIN A.  
STREET ADDRESS 8320 NW 54 CT.  
CITY-ST-ZIP SUNRISE, FL 33351 ☐ Change ☒ Addition

TITLE MGRM  
NAME SCHNECK, KONRAD A  
STREET ADDRESS DORNBERGSTR. 8  
CITY-ST-ZIP 91058 ERLANGEN, GERMANY ☒ Delete

TITLE MGRM  
NAME MAGGS, ANGELA C.  
STREET ADDRESS 8320 NW 54 CT.  
CITY-ST-ZIP SUNRISE, FL 33351 ☐ Change ☒ Addition

TITLE MGRM  
NAME ALEX, GUENTER H  
STREET ADDRESS SAIDELSTEIG 61  
CITY-ST-ZIP 91058 ERLANGEN, GERMANY ☒ Delete

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

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

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

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

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

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

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

11. 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: *[Signature]*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Date 1/30/2001 Daytime Phone # (954) 788-5506

CR2E083 (11/00)