

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

DOCUMENT # P00000010711

1. Entity Name

Brenda's Shear Delight, Inc

FILED

05 APR 28 PM 5:23

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

835 - C E. Park Ave

Suite, Apt. #, etc.

3. Mailing Address

4779 Sweetwater Lane

Suite, Apt. #, etc.

City & State

Tallahassee FL

Zip
FL 32301

Country

USA

City & State

Tallahassee FL

Zip
32317

Country

USA

4. FEI Number

59-3624615

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name

Brenda J. Moody

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

4779 Sweetwater Lane

City

Tallahassee

FL

Zip Code

32311

**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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible

Tax filing requirement and elects to do so.

(See criteria on back)



January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
Brenda Moody (Director)
4779 Sweetwater Lane
Tallahassee FL 32311

TITLE
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STREET ADDRESS
CITY - ST - ZIP

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05/10/05--01039--008 **150.00

**DO NOT WRITE
IN THIS SPACE**

13. 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 receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or on an attachment with an address, with all other like empowered.

SIGNATURE:

Brenda Moody

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

4/28/05

Daytime Phone #

850-656-4247

CR2E034B (12/01)