



2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 21, 2008 8:00 am
Secretary of State

05-21-2008 90018 015 ***158.75

DOCUMENT # P00000019269 1. Entity Name COUNTRY GENTLEMAN BARBER STYLISTS, INC.					
Principal Place of Business 6905 W BROWARD BLVD SUITE 115 PLANTATION, FL 33317-2920			Mailing Address 6905 W BROWARD BLVD SUITE 115 PLANTATION, FL 33317		
2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.			
City & State		City & State		4. FEI Number 65-1000580	
Zip		Country		5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent COCKMAN, HERBERT E 11430 NW 25TH STREET PLANTATION, FL 33323				7. Name and Address of New Registered Agent Name <u>Timothy Cochran</u> Street Address (P.O. Box Number is Not Acceptable) <u>11430 NW 25th Street</u> City <u>Plantation</u> <u>FL</u> Zip Code <u>33323</u>	
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 <u>[Signature]</u> DATE <u>5-17-08</u> <small>(Signature, typed or printed name of registered agent and title if applicable) (NOTE: Registered Agent signature required when reinstating)</small>					
FILE NOW!!! FEE IS \$150.00 Due by September 12, 2008			9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees		
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D COCKMAN, HERBERT E 11430 N.W. 25TH STREET PLANTATION, FL 33323	<input checked="" type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D COCHRAN, TIMOTHY 11430 N.W. 25TH STREET PLANTATION, FL 33323	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	 	<input type="checkbox"/> Delete			
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <u>[Signature]</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			Date <u>5-17-08</u> <small>Daytime Phone #</small>		

ATTACHMENT

50005586

To whom it may Concern. #P00000019269

I am filing the Annual Report for Country Gentleman Barber Stylist Inc. No one seems to know if it has been filed already as the owner Herbert E Cockman is deceased and his son Timothy Cockman is Medically ILL and not aware if it was filed or not and also the manager Ron Allen has passed away too! So anything you can do to help us out would be greatly appreciated

Thank You
Robert W. Jewell
Employee.