

2001 UNIFORM BUSINESS REPORT (UBR)**DOCUMENT # P00000035900**

1. Entity Name

MICHAEL A HAIR SALON, INC.**FILED****Apr 03, 2001 8:00 am**
Secretary of State

03-22-2001 90070 014 ***150.00

Principal Place of Business
**1081 WILSON BOULEVARD, N
NAPLES FL 34120**Mailing Address
**1081 WILSON BOULEVARD, N
NAPLES FL 34120**

2. Principal Place of Business

3401 Bonita Beach Rd.

3. Mailing Address

3401 Bonita Beach Rd.

Suite, Apt. #, etc.

#105

Suite, Apt. #, etc.

#105

City & State

Bonita Springs FL

City & State

Bonita Springs FL

Zip

34134

Country

LEE

Zip

34134

Country

LEE

4. FEI Number

59-3645182

Applied For

Not Applicable

5. Certificate of Status Desired ☐**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**HINMAN, MICHAEL
1081 WILSON BOULEVARD, N
NAPLES FL 34120**

7. Name and Address of New Registered Agent

Name **MICHAEL HINMAN**
Street Address (P.O. Box Number is Not Acceptable)**3401 Bonita Beach Rd. #105
Bonita Springs FL 34134**

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)

3-20-01

DATE

9. This corporation is eligible to satisfy its intangible
Tax filing requirement and elects to do so. ☒
(See criteria on back)**FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
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 ☐ Delete
NAME **HINMAN, MICHAEL**
STREET ADDRESS **1081 WILSON BOULEVARD, N**
CITY-ST-ZIP **NAPLES FL 34120**TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition
NAME **MICHAEL HINMAN**
STREET ADDRESS **3401 Bonita Beach Rd. #105**
CITY-ST-ZIP **Bonita Springs FL 34134**TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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 Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-20-01 941 390-3342

Date

Daytime Phone #

CR2E034 (10/00)