

**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 18, 2004 08:00 AM
Secretary of State

DOCUMENT # P00000059431	
1. Entity Name PATSY C. CASSIDY PERMANET MAKEUP ARTIST INC.	

Principal Place of Business 205 BROADWAY KISSIMMEE, FL 34741	Mailing Address 205 BROADWAY KISSIMMEE, FL 34741
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DO NOT WRITE IN THIS SPACE



03092004 No Chg-P CR2E034 (10/03)

4. FEI Number 59-3655325	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐	\$6.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**CASSIDY, PATSY
205 BROADWAY
KISSIMMEE, FL 34741**

**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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE *Patsy C. Cassidy* (NOTE: Registered Agent signature required when reappointing) DATE 3/9/04

**FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fee**

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PS CASSIDY, PATSY C 205 BROADWAY KISSIMMEE, FL 34741
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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 persons empowered.

SIGNATURE: *Patsy C. Cassidy* DATE 3/9/04 321-917-7052

SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #