

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P00000065115

1. Entity Name

BOHEMIA HAIR STUDIO, INC.

**FILED**  
May 02, 2001 8:00 am  
Secretary of State

05-02-2001 90082 023 \*\*\*150.00

Principal Place of Business

1400 SALZEDO STREET  
UNIT #105  
CORAL GABLES FL 33134

Mailing Address

1400 SALZEDO STREET  
UNIT #105  
CORAL GABLES FL 33134

2. Principal Place of Business

1400 SALZEDO STREET  
Suite, Apt. #, etc. 105

3. Mailing Address

1400 SALZEDO STREET  
Suite, Apt. #, etc. 105

City & State

Coral Gables

City & State

Coral Gables

4. FEI Number

65-1025478

Applied For

Not Applicable

Zip

33134

Country

Zip

33134

Country

5. Certificate of Status Desired

☐

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

SILVERA, ENRIQUE  
9370 S.W. 24 STREET  
MIAMI FL 33165

7. Name and Address of New Registered Agent

Name ENRIQUE SILVERA

Street Address (P.O. Box Number is Not Acceptable)  
2131 SW 58 CT

City

MIAMI, FL

FL

Zip Code

33155

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

Enrique Silvera

4/17/001

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)

☐

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 PTD  
NAME SILVERA, ENRIQUE  
STREET ADDRESS 9370 S.W. 24 STREET  
CITY-ST-ZIP MIAMI FL 33165

☐ Delete

TITLE VSD  
NAME VILLAR, MARIA J  
STREET ADDRESS 111 EDGEWATER DRIVE  
CITY-ST-ZIP CORAL GABLES FL 33133

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Change ☐ Addition

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☐ Change ☐ Addition

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:

Enrique Silvera

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

4/17/001

Daytime Phone #

305) 443-1735

0163787

CR2E034 (10/00)