FILED
May 18, 2001 8:00 am
Secretary of State
05-18-2001 91585 042 ***158.75

FROM : Gene Golden FAX NO. : 3053731442

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P00000076815

1. Entity Name
COLSAS CORPORATION
D/B/A CAPO BELLA SALON & SPA

Principal Place of Business	Mailing Address
227c 9TH ST. MIAMI BEACH FL 33139	1717 N. BAYSHORE DR. SUITE 3839 MIAMI FL. 33132

A0070259

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
CAPO BELLA SALON & SPA	1717 N. BAYSHORE DR.
Suite, Apt. #, etc.: 227c 9TH ST.	Suite, Apt. #, etc.: 3839
City & State: MIAMI FL.	City & State: MIAMI FL
Zip: 33139 Country: U.S.	Zip: 33132 Country: U.S.

4. FEI Number: 651024106 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☑ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
PETER BRITO 5702 S.W. 49 ST. MIAMI FL 33155	Name: TAMMY MARCIANO Street Address (P.O. Box Number is Not Acceptable): 2107 N.E. 123 ST. City: N. MIAMI FL Zip Code: 33181

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] 4/30/01
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) ☐

10. Election Campaign Financing Trust Fund Contribution. ☐ $5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D DANIEL SASSO 8100 S.W. 163 PL. MIAMI FL. 33193 ☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D GENE GOLDEN 1717 N. BAYSHORE DR. #3839 MIAMI FL. 33132 ☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D GEORGINA SASSO 8100 S.W. 163 PL. MIAMI FL. 33193 ☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D MARLIES SANJORO 1610 EUCLID AVE. #C MIAMI BEACH, FL. 33139 ☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D WILLIAM COLLADO 5702 S.W. 49TH ST. MIAMI FL. 33155 ☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition

CR2E034 (11/00)

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: Gene Golden GENE GOLDEN 4/30/01 305-373-9781
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #