2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Sep 05, 2002 8:00 am
Secretary of State
09-05-2002 90039 008 ***150.00

DOCUMENT # P00000080494

1. Entity Name
L'ESCAPADE SPA & SALON, INC.

Principal Place of Business
2111 N. University Drive -

Mailing Address
SAME

[redacted]

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
2111 N. University DR.
Suite, Apt. #, etc.

3. Mailing Address
SAME AS Above
Suite, Apt. #, etc.

City & State
PLANTATION, FLORIDA

City & State //

Zip
33322

Country
USA

Zip //

Country //

4. FEI Number
65-1041740

☐ 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

Name
GINETTE ORIOL

Street Address (P.O. Box Number is Not Acceptable)
2111 N. University Drive

City
PLANTATION

FL

Zip Code
33322

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 _____ 8-30-02
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, 2002 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			12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	RICHARD ABRAHAMS-VD 3929 E. LAKE PLACE MIRAMAR, FL. 33023	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	GINETTE ORIOL-VD 4551 N.W. 41 CT. FT. LAUDERDALE, FL. 33319	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PETER BLAZE-PD 2111 N. UNIVERSITY DRIVE PLANTATION, FLORIDA 33324	☐ 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

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: _____ 8-30-02
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

Attachment

L'Escapade Spa & Salon
2111 N. University Drive
Plantation, Florida 33322
(954) 742-4441

8-30-02

To whom it may concern;

I spoke to one of your representatives because I had not recieved our Uniform business report for 2002.

She instructed me to download a form from the internet, fill it out and send it right away with the $50.00 fee. Per her instruction I am sending the enclosed form and a check for said fee.

Thank You for your assistance in this matter.

Regards,
L'Escapade Spa & Salon
co-owner, Janette Quick