## 2003 UNIFORM BUSINESS REPORT (UBR)

## DOCUMENT# P00000089899

Entity Name: THE BARBER CONNECTION, INC.

FILED Sep 10, 2003 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

10421 GREEN HEDGES DR. 17119 JOURNEYS END DRIVE

TAMPA, FL 33626 ODESSA, FL 33556

**Current Mailing Address: New Mailing Address:** 

10421 GREEN HEDGES DR. 17119 JOURNEYS END DRIVE

TAMPA, FL 33626 ODESSA, FL 33556

FEI Number: 59-3679784 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

Name and Address of New Registered Agent: Name and Address of Current Registered Agent:

BARBER, CLAUDIA P BARBER, CLAUDIA P. 10421 GREEN HEDGES DR. 17119 JOURNEYS END DRIVE

TAMPA, FL 33626 ODESSA, FL 33556

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: CLAUDIA P. BARBER 09/10/2003

> Electronic Signature of Registered Agent Date

> > Title:

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:** 

Title: MRS ( ) Delete BARBER, CLAUDIA P PRES. Name: 10421 GREEN HEDGES DRIVE

City-St-Zip: TAMPA, FL 33626 US

Title: () Delete Name:

Address: City-St-Zip:

Address:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: MRS (X) Change ( ) Addition BARBER, CLAUDIA P PRES. Name: Address: 17119 JOURNEYS END DRIVE

City-St-Zip: ODESSA, FL 33556 US

( ) Change (X) Addition BARBER, JAMAEL O CFO Name: Address: 17119 JOURNEYS END DRIVE

ODESSA, FL 33556 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CLAUDIA P. BARBER **PRES** 09/10/2003