5/1

FILED
Jun 29, 2001 8:00 am
Secretary of State
05-15-2001 90151 039 ***150.00

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P00000109492

1. Entity Name
INNERVISION BEAUTY & WELLNESS CORP

Principal Place of Business	Mailing Address
PO BOX 22152 LAKE BUENA VISTA FL 32830	PO BOX 22152 LAKE BUENA VISTA FL 32830

[redacted]

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
31 TROPHY LANE	PO BOX 22152
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Kissimmee FL	City & State: Lake Buena Vista FL
Zip: 34759 Country: United States	Zip: 32830 Country: United States

4. FEI Number ☑ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent
FLESHER, NANCY
229 ALMA ST
KISSIMMEE FL 34741

7. Name and Address of New Registered Agent
Name: CAROL RASHEED
Street Address (P.O. Box Number is Not Acceptable): 31 TROPHY LANE
City: Kissimmee FL Zip Code: 34759

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 Carol Rasheed - President/owner 5-1-01
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) ☐

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		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	President / owner Carol Rasheed 31 Trophy Lane Kissimmee FL 34759 ☐ 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
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 (10/00)

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: Carol Rasheed 5-1-01 407-846-0562
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

6/2[redacted]/01 - 1:10 PM -

Attachment 9173 #P00000010 9172

SS-4 Application for Employer Identification Number

(For use by employers, corporations, partnerships, trusts, estates, churches, government agencies, certain individuals, and others. See instructions.)

► Keep a copy for your records.

EIN

Please type or print clearly.

1 INNERVision BEAUTY & WELLNESS

2

3 CAROL RASHEED

4a PO BOX 22152

5a 31 TROPHY LANE

4b LAKE Buena Vista 32830

5b Kissimmee FL 34759

6 ~~31 TROPHY~~ Osceola, FLORIDA

7 CAROL RASHEED - 263-91-0661 SS#

8a

Caution: If applicable, ...

C Corporation

8b United States

Foreign country

9 ✓

10 11/2000

12 N/A

13 Note: ...

14 CONSULTING

15 ☐ Yes ☒ No

16 N/A ☐ Wholesale ☐ Yes ☐ No

17a Note: ...

17b NETWORK BEAUTY INC

17c 8/4/95 Kissimmee, Florida

59 3263022

Business telephone number (include area code)

407 846-0562