

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Sep 15, 2003 8:00 am
Secretary of State

08-11-2003 90286 017 ***150.00

DOCUMENT # P01000058625
1. Entity Name

House of Charms II, INC.



DO NOT WRITE IN THIS SPACE

44005877

2. Principal Place of Business
7913 PINES BLVD
Suite, Apt. #, etc.

3. Mailing Address
7913 PINES BLVD
Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State
PEMBROKE PINES

City & State
PEMBROKE PINES

4. FEI Number
65-0875520

Zip Country
33024-6917 USA

Zip Country
33024-6917 USA

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

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name
POTTINGER, DOROTHY

Street Address (P.O. Box Number is Not Acceptable)
7913 PINES BLVD

City
PEMBROKE PINES FL Zip Code
33024-6917

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. I am familiar with and understand the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

January 1 - May 1 Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$61.25
Make Check Payable to Florida Department of State

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

10. OFFICERS AND DIRECTORS

| | | | |
|--|--|--|---------------------------------------|
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | DPTS POTTINGER, DOROTHY 7913 PINES BLVD PEMBROKE PINES, FL 33024-6917 | TITLE NAME STREET ADDRESS CITY - ST - ZIP | |
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12. 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 10 of this attachment with an address, with all other like empowered.

SIGNATURE

Dorothy Pottinger

DOROTHY POTTINGER, 8/8/03

954-898-1616

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR



44005877

FLORIDA DEPARTMENT OF STATE

Glenda E. Hood

Secretary of State

August 13, 2003

HOUSE OF CHARMS II, INC.
7913 PINES BLVD
PEMBROKE PINES, FL 33024-6917

Subject: HOUSE OF CHARMS II, INC.

Reference Number: P01000058625

Please be advised, we have received your annual report/uniform business report and your check(s) totaling \$150.00; however, the report **has not been filed** and a copy is being returned for the following correction(s):

The fee to file the profit annual report/uniform business report is \$150.00 plus \$400.00 late fee for a total of \$550.00. If a certificate of status is desired, please add an additional \$8.75.

There is a balance due of \$400.00.

TO AVOID THE ADMINISTRATIVE DISSOLUTION/REVOCATION, PLEASE RETURN THE CORRECTED REPORT TO: DIVISION OF CORPORATIONS, P.O. BOX 1500, TALLAHASSEE, FLORIDA 32302-1500 WITHIN 30 DAYS OF THE DATE OF THIS LETTER.

If you have additional questions or need further assistance, please call the Division of Corporations at 850-245-6056 and press 4. Your call will be answered in the order it is received.

/RH
ANNUAL REPORTS SECTION

305 323 1982

Please be advised that I returned the UBR form within the time you requested in order to avoid \$400. penalty. Please review this and as you SHAVE process my form without the penalty.

Division of Corporations - P.O. BOX 6327 - Tallahassee, Florida 32314

Thank.
9/11/03

Attachment
#44005877



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood
Secretary of State

July 29, 2003

HOUSE OF CHARMS 11, INC.
7913 PINES BLVD
PEMBROKE PINES, FL 33024

SUBJECT: HOUSE OF CHARMS 11, INC.
Ref. Number: P01000058625

We have received your check(s); however it cannot be processed and is being returned for the following:

There was not a completed annual report/uniform business report form submitted with your check. The enclosed form must be completed in its entirety and resubmitted with the filing fee.

TO AVOID THE \$400.00 LATE FEE, PLEASE RETURN THE CORRECTED REPORT TO: DIVISION OF CORPORATIONS, P.O. BOX 1500, TALLAHASSEE, FLORIDA 32302-1500 WITHIN 30 DAYS OF THE DATE OF THIS LETTER.

If you have additional questions or need further assistance, please call the Division of Corporations at (850) 488-9000 and press 4. Your call will be answered in the order it is received.

/vrn
ANNUAL REPORTS SECTION

Letter number: 903A00043731

Director's Office