2002 HNIFORM RUSINESS REDORT (HRD)

| 2002 UNIFORM BUSINESS REPORT (UBR) | | | | | FILED Apr 22, 2002, 8:00 am | | | |
|--|--|---|--|------------------------------|---|----------------------------|-----------------------------|----------------|
| DOCUMENT # P01000059679 1. Entity Name | | | | | Apr 22, 2002 8:00 am Secretary of State | | | |
| THE BEAUTY SUPPLY WAREHOUSE, INC. | | | | | 04-22-2002 | 90294 027 ***150 | 0.00 | • |
| · · | ce of Business IWEST 2ND AVE 69 | Mailing Address 18130 NORTHWEST 2ND AV MIAMI FL 33169 | VE | | | | | |
| 2. Principal F | Place of Business On 7 | 3. Mailing Address | stato DN | 7 | | | | |
| Suite, Apt. | ` | Suite, Apt. #, etc. | MILKU | 7 | DO NOT WRITI | E IN THIS SPACE | | |
| Laude Zip | | Lauder hill Zip | Country | | 65-11151 | 54 A | pplied For ot Applicable | |
| 333 | 6. Name and Address of Current R | 33313 | V.S.P | 1 | Certificate of Status Desired Name and Address of New Re | Fee Require | | |
| 343 ALME | & UTRERA, P.A. RIA AVENUE ABLES FL 33134 | | Name / | hmac ddress (P.O. 21 N | Banihan Box Number is Not Acceptable State RD | <i>)</i> タ | | |
| | | · | City | auder | hill | FL Zip Coo | | |
| 8. The above | e named entity submits this statement for the st | Ahmad | egistered office or Bania Registered Agent signatu | hani | 4 | ida. _9_02 DATE | } | |
| Tax filing | oration is eligible to satisfy its Intangible requirement and elects to do so. ria on back) | FILE NOW!! After May 1, 200 Make Check Payabl | | 50.00 | 10: Election Campaign Fina Trust Fund Contribution | | 00 May Be d to Fees | |
| 11. TITLE NAME STREET ADDRESS CITY-ST-ZIP | PSTD BANYHANY, MUHAMED 18130 NORTHWEST 2ND AVE MIAMI FL 33169 | IRECTORS Delete | | PSD Ahmad | DDITIONS/CHANGES TO OFFICE Banihani State RD 7 | CERS AND DIRECTOR Change | | CR2E034 (9/01) |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | ☐ Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | VTC Muhan | med Banghany N.w 2nd ave | ⊠ Change | ☐ Addition | S. C. |
| TITLE NAME: STREET ADDRESS CITY-ST-ZIP | ್ . ಇವರಿಯುವ ಆಶಕ್ತಿಯ ನಗೆ ನಿಂದರೆ ನಿರ್ವಹಿಸಿಗೆ | Delete | TITLE NAME = = STREET ADDRESS CITY-ST-ZIP | | ي محمد المحمد | Change | ☐ Addition | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | ☐ Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | | | ☐ Change | Addition | |
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| TITLE NAME STREET ADDRESS CITY-ST-ZIP | /\ | ☐ Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | | | ☐ Change | Addition | |
| of the cor | certify that the information supplied with the on this report or supplemental report is troporation or the receiver or trustee empower or on an attachment with an laddress, with | ue and accurate and that my ered to execute this report as | / eignati iro chall ha | we the come | legal effect as if made under or | the that I am an afficar | ar disastar | |
| SIGNAT | URE: SENATURE AND TYPED OR PRIM | MUNUME A | Bany | <u> pany</u> | 4-9-82 Date | 307-675 Daytime Phone # | -1775 | |