

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Sep 17, 2002 8:00 am
Secretary of State

09-17-2002 90091 006 ***150.00

DOCUMENT # P01000070395

1. Entity Name
ABOVE & BEYOND DAY SPA INC.

Principal Place of Business
5925-10 LONGBOW LANE
WEST PALM BEACH FL 33415

Mailing Address
5925-10 LONGBOW LANE
WEST PALM BEACH FL 33415



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
6026 LAKE WORTH RD
 Suite, Apt. #, etc.
LAKE WORTH FL

3. Mailing Address
6026 LAKE WORTH RD
 Suite, Apt. #, etc.

City & State
LAKE WORTH FLORIDA

4. FEI Number
65-1123410
 Applied For
 Not Applicable

Zip
33463
 Country
USA

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

KIESLING, ROBERT A
4793 N CONGRESS AVE #206
BOYNTON BEACH FL 33426

Name
 Street Address (P.O. Box Number is Not Acceptable)
 City **FL** Zip Code

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 accept the obligations of registered agent.

SIGNATURE DATE **9-12-02**
Signature, typed or printed name of registered agent and agent applicable. (NOTE: Registered Agent signature required when reinstating)

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 \$550.00
After September 13, 2002 Fee will be \$750.00
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 | <input type="checkbox"/> Delete | TITLE | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | | NAME | |
| STREET ADDRESS | | STREET ADDRESS | |
| CITY-ST-ZIP | | CITY-ST-ZIP | |
| TITLE | <input type="checkbox"/> Delete | TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | | NAME | |
| STREET ADDRESS | | STREET ADDRESS | |
| CITY-ST-ZIP | | CITY-ST-ZIP | |
| TITLE | <input type="checkbox"/> Delete | TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | | NAME | |
| STREET ADDRESS | | STREET ADDRESS | |
| CITY-ST-ZIP | | CITY-ST-ZIP | |
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| STREET ADDRESS | | STREET ADDRESS | |
| CITY-ST-ZIP | | CITY-ST-ZIP | |
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| NAME | | NAME | |
| STREET ADDRESS | | STREET ADDRESS | |
| CITY-ST-ZIP | | CITY-ST-ZIP | |

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: **9-12-02**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (4/02)

Attachment # P01000070395
125745

Above & Beyond May Spa Inc.
6026 Lake Worth Road
Lake Worth FL 33463

September 12, 2002

Division of Corporations
Uniform Business Report Filings
P.O. Box 1500 Tallahassee FL 32302-1500

To Whom This May Concern:

Please expect my 2002 Uniform Business
Report Rec # P01000070395 along with an
enclosed check made out to Dept of State
in the amount of \$150.-

Sorry for the inconvenience, I never received
the original notice. If there are any
problems please call me at 561-642-0665.

Sincerely
Arlene Parkhurst