

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

DOCUMENT # P01000093060

1. Entity Name De Youngster's Int. Salon & Boutique Corp.

**FILED**

02 APR 22 AM 10:18

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**DO NOT WRITE IN THIS SPACE**

2. Principal Place of Business  
1350 E Tennessee St Unit B-4

3. Mailing Address  
1350 E Tennessee St Unit B-4

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State  
Tall. FL.

City & State  
Tall. FL.

4. FEI Number

☒ Applied For  
☐ Not Applicable

Zip  
32308

Country  
Leon

Zip  
32208

Country  
Leon

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

DO NOT WRITE IN THIS SPACE

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IN THIS SPACE**

**7. Name and Address of Current Registered Agent**

Name Janet Yamoah

Street Address (P.O. Box Number is Not Acceptable)  
1350 E Tennessee St Unit B-4

City Tall.

**FL**

Zip Code  
32308

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 Janet Yamoah

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

(NOTE: Registered Agent signature required when reinstating)

DATE 4/22/02

9. This corporation is eligible to satisfy its Intangible  
Tax filing requirement and elects to do so. ☐  
(See criteria on back)

**January 1 - May 1 Fee is \$150.00  
After May 1, Fee is \$550.00  
Amended UBR is \$61.25  
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**

TITLE Owner  
NAME Janet Yamoah/De Youngster's Int. Salon & Boutique Corp.  
STREET ADDRESS 1350 E Tennessee St Unit B-4  
CITY-ST-ZIP Tall. FL. 32308

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**300005492913--5  
-05/09/02--01001--028  
\*\*\*\*150.00 \*\*\*\*150.00**

TITLE Co-Owner  
NAME Albert Yamoah  
STREET ADDRESS 1350 E Tennessee St Unit B-4  
CITY-ST-ZIP Tall. FL. 32308

TITLE  
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CITY-ST-ZIP

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CITY-ST-ZIP

**DO NOT WRITE  
IN THIS SPACE**

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 on an attachment with an address, with all other like empowered.

SIGNATURE: Janet Yamoah Janet Yamoah  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/22/02

Date

850 878 3399

Daytime Phone #

CR2E034B (12/01)