

2004 FOR PROFIT CORPORATION  
ANNUAL REPORT

**FILED**  
**Jul 21, 2004 8:00 am**  
**Secretary of State**

07-21-2004 90028 013 \*\*\*150.00

**DOCUMENT # P02000060858**

1. Entity Name  
KUTZ-N-KURLS W/ NAILS BY JANJAN, INC.



Principal Place of Business  
903 10TH STREET EAST  
PALMETTO, FL 34221

Mailing Address  
903 10TH STREET EAST  
PALMETTO, FL 34221



07042004 No Chg-P CR2E034 (10/03)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number 32-0022672	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

6. Name and Address of Current Registered Agent

GRAHAM, TROY A  
903 10TH STREET EAST  
PALMETTO, FL 34221

**DO NOT WRITE  
IN THIS SPACE**

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 *Troy A. Graham*

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

(NOTE: Registered Agent signature required when reinstating)

7/14/04  
DATE

**FILE NOW!!! FEE IS \$550.00**  
Due by September 8, 2004

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

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	GRAHAM, TROY
STREET ADDRESS	704 29TH STREET EAST
CITY-ST-ZIP	PALMETTO, FL 34221
TITLE	D
NAME	WRIGHT, JANICE
STREET ADDRESS	P.O. BOX 4
CITY-ST-ZIP	PALMETTO, FL 34220
TITLE	D
NAME	LILLY, MARY
STREET ADDRESS	3019 9TH AVENUE EAST
CITY-ST-ZIP	PALMETTO, FL 34221
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE  
IN THIS SPACE**

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 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Troy A. Graham*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/14/04 (941) 729-7115  
Date Daytime Phone #

Attachment  
44049288  
# P02000060858

To whom it may concern:

Kutz-n-Kurls w/ Nails by JanJan Inc. just received our first notice in the mail. So could you please waive the \$400.00 late fee please? Along with the letter is our check for \$150.00.

Thank you,

Troy Graham