

2004 FOR PROFIT CORPORATION
ANNUAL REPORT

DOCUMENT # P02000060858

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



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

07-21-2004 90028 013 ***150.00

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 ☐

\$8.75 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, typed 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

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