## 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

## **FILED** Mar 24, 2003 8:00 am Secretary of State 03-12-2003 90075 009 \*\*\*150.00

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DOCUMENT # P02000126966  1. Entity Name DAH HAIR, INC.													
Principal Place of Business 2141 MAIN STREET SUITE E				Mailing Address 2141 Main Street Suite E Duniedin Fl. 34698				1 14877844 NI 48178 NAI 18872 8411 881	ri ef <b>ilið</b> i <b>ld</b> i		01116. 0161 (200)		
DUNEDIN FL 34698													
2. Principal Place of Business				3. Mailing Address					i i beriadt ist dötig tinti sessi antis eni	H 11818 1181	4 Attib ( Attib )	mille beil 1881	
Suite, Apt. #, etc.				Suit	Suite, Apt. #, etc.				CHECK HERE IF MAKING CHANGES				
City & State				City	City & State			4.	54-208 38	54	, <del>    -</del>	oplied For of Applicable	
Zip	Country			Zip		try	5. Certificate of Status Desired Security Securi						
6. Name and Address of Current F				Registere	ed Agent	7. Name and Address of New Registered Agent							
							- Name						
HENDERSHOT, DARLENE H						Street Address (P.O. Box Number is Not Acceptable)							
2141 MAIN STREET SUITE E													
DUNEDIN FL 34698						City			FL	Zip Code	в		
A The shove	named entit	v submi	ts this statement fo	r the purp	ose of changing its	registere	d office or regist	tered ag	gent, or both, in the State of Florida.		l niliar with,	and accept	
the obligat	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 .					- Canada	* Onerinters	d Agent signature requi	red when r	rejectation)	DATE			
		<del></del> -{	name of registered agent	and the ilapp	means. (NOTE	:: negratere	O Aperil algriduore recom	O WING					
FILE NOW!!! FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00									Election Campaign Financia     Trust Fund Contribution.	ng 🗆		O May Be I to Fees	
Make Check	k Payable t	o Flori	ia Department o	f State	1				irasi Fana Contribution.		Auceu	1101-665	
10.			OFFICERS AND	DIRECTO	PRS	11.		A	DDITIONS/CHANGES TO OFFICER				
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12 I beechy e	certify that th	e inform	ation supplied with	this filing	does not qualify for	the exer	mption stated in S	Section	119.07(3)(i), Florida Statutes. I furth	er certify	that the in	formation	
	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.												