

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P02000130112

1. Entity Name  
HAIR & ALL BEAUTY SALON INC



Principal Place of Business  
2319 E. FOWLER AVE  
TAMPA, FL 33612

Mailing Address  
3119 MARBLE CREST DR  
LAND O LAKES, FL 34638

**FILED**  
**Aug 14, 2008 08:00 AM**  
**Secretary of State**



08082008 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
13-4225570  
Applied For  
Not Applicable  
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

UNNISA, BADAR Z  
3119 MARBLE CREST DR  
LAND O LAKES, FL 34638

**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 \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

**FILE NOW!!! FEE IS \$150.00  
Due by September 12, 2008**

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

In accordance with s. 607.193(2)(b), F.S., the  
corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	UNNISA, BADAR Z
STREET ADDRESS	3119 MARBLE CREST DR
CITY-ST-ZIP	LAND O LAKES, FL 34638
TITLE	VP
NAME	ZAIDI, SUHAIL
STREET ADDRESS	3119 MARBLE CREST DR
CITY-ST-ZIP	LAND O LAKES, FL 34638
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

U00000957708  
08/14/08-80003-007 8.75

U00000957708  
08/14/08-80003-008 150.00

**DO NOT WRITE  
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: BADAR Z. UNNISA, PRES 8/8/08 813-979-0058  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #