

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

DOCUMENT # P03000006083

1. Entity Name

Manhattan Hair Styling Inc.



FILED

06 DEC 26 PM 12:25

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

6488 Pines Boulevard

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

REINSTATEMENT

DO NOT WRITE IN THIS SPACE

City & State

Pembroke Pines, Fla

City & State

4. FEI Number

161650559

Applied For

Not Applicable

Zip

33024

Country

Florida

Zip

Country

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name

Rafael J. Rodriguez

Street Address (P.O. Box Number is Not Acceptable)

622 N. State Rd 7

City

Hollywood FL

FL

Zip Code

33021

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, and accepts the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

January 1 - May 1 Fee is \$150.00

After May 1 Fee is \$550.00

Amended UBR is \$81.25

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution.

☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
PID
Sanabria William N
6488 Pines Boulevard
Pembroke Pines, FL 33024

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
STD
Ferrecho Miguel A.
6488 Pines Boulevard
Pembroke Pines, FL 33024

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

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**DO NOT WRITE
IN THIS SPACE**

K. Eckel DEC 27 2006

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

SIGNATURE:

[Signature]

Signature and typed or printed name of signing officer or director

12/20/06

Daytime Phone #

CR2E034B (12/02)

2/2

RJR ACCOUNTING SERVICES

TEL 954 - 9628699 / FAX 954 - 9628648

Taking Care of Business

December, 20/2006

Division of Corporations
P.O Box 6327
Tallahassee, Fl 32314

Reference
Manhattan Hair Styling Inc.
6488 Pines Boulevard
Pembroke Pines, Fl 33024
2006 Annual Report
P03000006083

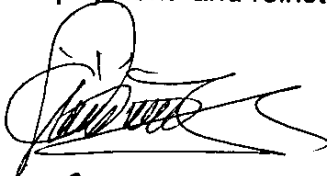
Enclosed are the 2006 Annual Report and a Ck for the amount off \$150


In order to cover the Original Annual Fee.

This Annual Report Form was never received by the Officers of the Corporation
and the form was not filed and paid on time

Please accept the payment and reinstate the Company

Thanks,




Rafael J Rodriguez
Accountant