

# 2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT # P03000094569

1. Entity Name  
BELLA U SALON & CO. INC.



**FILED**  
09 JAN 29 AM 10: 58  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Principal Place of Business  
5443 AIRPORT PULLING RD NO  
NAPLES, FL 34109

Mailing Address  
5443 AIRPORT PULLING RD NO  
NAPLES, FL 34109



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

01282009 REIN-P CR2E098 (1/07)

City & State

City & State

4. FEI Number

86-1079892

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☒

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

NAIR, KIMBERLY  
2430 VANDERBILT BEACH RD  
SUITE 108-272  
NAPLES, FL 34109

Name  
NANCY GLORIOSO

Street Address (P.O. Box Number is Not Acceptable)  
16258 RAVINAWAY

City  
NAPLES

FL 34110

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 *Nancy Glorioso* NANCY GLORIOSO

1/28/09

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$300.00**

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

10. OFFICERS AND DIRECTORS

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
PD  
GLORIOSO, NANCY A  
1083 PORT ORANGE WAY  
NAPLES, FL 34120 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
PD  
KENNETH MORROW  
16258 RAVINAWAY  
NAPLES FL 34110 ☐ Change ☒ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
VM  
NANCY GLORIOSO  
16258 RAVINAWAY  
NAPLES FL 34110 ☒ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
700142418827  
01/29/09--01046--018 \*\*\*308.75 ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition

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 *Kenneth Morrow* KENNETH MORROW

1/28/09

239-594-9588

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #