

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000103351

FILED
Jul 17, 2006
Secretary of State

Entity Name: UPPERCUTZ BARBER SHOP, INC.

Current Principal Place of Business:

1574 NE 205 ST
MIAMI, FL 33179

New Principal Place of Business:

Current Mailing Address:

1595 NE 135 ST
APT# 440
MIAMI, FL 33161

New Mailing Address:

540NW 47 TER
MIAMI, FL 33127

FEI Number: 90-0117870

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

WILLIAM, KUJIAWA J DPT
1595 N.E. 135TH ST
APT. 440
MIAMI, FL 33179 US

Name and Address of New Registered Agent:

WILLIAM, KUJIAWA J P
540NW 47 TER
MIAMI, FL 33127 US

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.

SIGNATURE: KUJIAWA WILLIAMS

07/17/2006

Electronic Signature of Registered Agent

Date

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: WILLIAMS, KUJIAWA J
Address: 1595 N.E. 135TH ST
City-St-Zip: MIAMI, FL 33161

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: WILLIAMS, KUJIAWA J P
Address: 540 NW 47 TER
City-St-Zip: MIAMI, FL 33127

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: KUJIAWA WILLIAMS

P

07/17/2006

Electronic Signature of Signing Officer or Director

Date