

2006
**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Jun 09, 2006 8:00 am
Secretary of State

06-09-2006 90001 038 ***150.00

DOCUMENT #

1. Entity Name P04 000053442

CUT & STYLE, INC.

DO NOT WRITE IN THIS SPACE

50021163

2. Principal Place of Business

20505 S Dixie Hwy.

Suite, Apt. #, etc.

1691

Miami FL 33189

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number

33-1088089

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

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IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name

Nuriam Fulcher

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

6790 SW 34th Street

City

Miami

FL

Zip Code
33155

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when resigning)

6/6/06

DATE

9. This corporation is eligible to satisfy its Intangible

Tax filing requirement and elects to do so.

(See criteria on back)

☐

January 1 - May 1 Fee is \$150.00

After May 1: Fee is \$550.00

Amended UBR is \$61.25

Make Check Payable to Department of State

10. Election Campaign Financing

Trust Fund Contribution.

☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
President / ... Director
Nuriam Fulcher
6790 SW 34th Street
Miami, FL 33155

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Vice-Pres / Director
Dora Dulac
10832 SW 88th Street # U9
Miami, FL 33176

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Secretary
Agnes Fulcher
6790 SW 34th Street
Miami, FL 33155

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Secretary
Agnes Fulcher
6790 SW 34th Street
Miami, FL 33155

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13. 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 11 or on an attachment with an address, with all other like empowered.

SIGNATURE:

NURIAM FULCHER PRES.

6/6/06 305 971-9664

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

County Phone #

CR2E034B (12/01)

ATTACHMENT

5-0021163
#P04000053442

MAY 19, 2006

CUT & STYLE, INC
20505 S DIXIE HWAY.
MIAMI. FL 33189
P04-000053442
33-1088089

STATE OF FLORIDA
DIVISION OF CORPORATIONS
PO BOX 1500
TALLAHASSEE, FL 32302-1500

DEAR SIR OR MADAM:

ENCLOSED IS THE CORPORATION ANNUAL REPORT
FOR 2006.

THIS FORM WAS NOT FILED PRIOR TO MAY 1st 2006
BECAUSE WE NEVER RECEIVED THE RENEWAL IN THE MAIL.

A PERSON FROM YOUR OFFICE SAID, "THAT YOU WOULD
ALLOW THE FORM TO BE FILED NOW WITHOUT A PENALTY". ENCLOSED IS
A CHECK FOR \$ 150.00.

THANK YOU VERY MUCH.

VERY TRULY YOURS,
CUT & STYLE, INC..


By: NURIAM FULCHER, PRESIDENT