

112
FILED

2005 OCT 21 AM 10:27

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

bb043036

2005 FOR PROFIT CORPORATION
ANNUAL REPORT

DOCUMENT # P04000114709

1. Entity Name
NEXT GENERATION SALON, INC.Principal Place of Business
9595 BARLETTA WINDS POINT
DELRAY BEACH, FL 33446Mailing Address
9595 BARLETTA WINDS POINT
DELRAY BEACH, FL 33446

REINSTATEMENT



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

05032005

Chg-P

CP2E034 (10/03)

City & State

City & State

4. FEI Number

38-3719509

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

MALLINGER, MARTIN R
COMPSON FINANCIAL CENTER, SUITE 302
980 NORTH FEDERAL HIGHWAY
BOCA RATON, FL 33432-2704

Name

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

City

FL

Zip Code

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 fee if applicable

NOTE: Registered Agent signature required when reinstating

DATE

FILE NOW!! FEE IS \$550.00
Due by September 7, 20059. Election Campaign Financing
Trust Fund Contribution.☐\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME BOCCIA, ALBERT L ☐ Delete
STREET ADDRESS 9595 BARLETTA WINDS POINT
CITY-ST-ZIP DELRAY BEACH, FL 33446TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE
NAME DVPS ☐ Delete
STREET ADDRESS 1101 BEL-AIR DRIVE
CITY-ST-ZIP HIGHLAND BEACH, FL 33487TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP000000361235
05/05/05-80067-016 150.00TITLE
NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE
NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐ Addition
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NAME
STREET ADDRESS
CITY-ST-ZIPTITLE
NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 118.07(3)(b), 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 information.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

05/03/2005

(561) 392-3555

Date

Telephone

10/25
aw

2/2



H&R BLOCK
premium

tax, mortgage and financial services

OCTOBER 14, 2005

FLORIDA DEPARTMENT OF STATE
P.O. BOX 6327
TALLAHASSEE, FLORIDA 32314

RE: NEXT GENERATION SALON, INC
P04000114709

DEAR SIRs:

WE ACKNOWLEDGE RECEIPT OF YOUR NOTICE OF DISSOLUTION FOR THE ABOVE CORPORATION. WE FIND THAT THE ORIGINAL MAIL WAS LOST AND NEVER RECEIVED. FURTHER, WE WERE UNDER THE IMPRESSION THAT OUR REGISTER AGENT WAS TAKING CARE OF THE REQUIRED FILINGS.

WE ARE ENCLOSING A FILING FEE OF \$150.00 AS ORIGINALLY REQUESTED AND ASK THAT THE REINSTATEMENT FEE BE WAIVER WITH THE ASSURANCE THAT WE HAVE CORRECTED THE PROBLEM FOR THE FUTURE.

WE ALSO REQUESTED THAT THE FILING ADDRESS BE CHANGED TO 1101 BEL AIR DRIVE, APT A, HIGHLAND BEACH, FLORIDA 33487.

WE THANK YOU IN ADVANCE FOR YOUR CONSIDERATION.

SINCERELY,

WILLIAM L FORD E.A.
DIRECTOR

SINCERELY,

ELAN LEVY
VICE PRESIDENT