


# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**May 14, 2007 8:00 am**  
**Secretary of State**

05-14-2007 90067 012 \*\*\*150.00

<b>DOCUMENT # P05000010877</b> 1. Entity Name <b>N FASHION &amp; KUTZ BARBERSHOP, INC.</b>					
Principal Place of Business <b>1232 W. UNIVERSITY AVE. GAINESVILLE, FL 32601</b>			Mailing Address <b>1232 W. UNIVERSITY AVE. GAINESVILLE, FL 32601</b>		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number <b>35-2229828</b>	
5. Certificate of Status Desired <input type="checkbox"/>				<b>\$8.75 Additional Fee Required</b>	
<b>6. Name and Address of Current Registered Agent</b>  <b>HALL, MARLO 2414 SE 12TH TERRACE GAINESVILLE, FL 32601</b>			<b>7. Name and Address of New Registered Agent</b> Name <b>Marlo Hall</b> Street Address (P.O. Box Number is Not Acceptable) <b>1340 NW 25th Terrace</b> City <b>Gainesville</b> <b>FL</b> Zip Code <b>32605</b>		
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 <u><i>Marlo A. Hall</i></u> (NOTE: Registered Agent signature required when reinstating.) DATE <b>4-27-07</b>					
<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>			
<b>10. OFFICERS AND DIRECTORS</b>			<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11</b>		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>MRS HALL, MARLO A OWNER 1232 W. UNIVERSITY AVENUE GAINESVILLE, FL 32601</b> <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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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.					
<b>SIGNATURE:</b> <u><i>Marlo A. Hall</i></u>			<b>4-27-07</b> <b>352-284-0050</b>		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			Date Daytime Phone #		

40111000



04272007 Chg-P CR2E034 (12/06)

4. FEI Number  
35-2229828

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

7. Name and Address of New Registered Agent  
Name **Marlo Hall**  
Street Address (P.O. Box Number is Not Acceptable)  
**1340 NW 25th Terrace**  
City **Gainesville** **FL** Zip Code **32605**

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 *Marlo A. Hall* (NOTE: Registered Agent signature required when reinstating.) DATE **4-27-07**

9. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

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**SIGNATURE:** *Marlo A. Hall* **4-27-07** **352-284-0050**

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