

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

MOVED
AND
FILED

98 NOV 13 PM 4:10

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

APPLICATION
94-98 AR
REINSTATEMENT
FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P93000060990**

1. Corporation Name

THE HAIR ENGINEER INC

W98-24460

Principal Place of Business

Mailing Address

12554 PINES BLVD

PEMBROKE PARK FL 33087

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida

9-22-93

5. FEI Number

65-0434092

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required
for a Certificate of Status

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	4 City / State / Zip
PRES	ANDRES FLORES	1932 NE 118TH RD	N. MIAMI FL 33181
SEC	REGINA M CAKVAHO	1932 NE 118TH RD	N. MIAMI FL 33181

100002689431--0
-11/17/98--01048--004
******\$15.00 ****\$15.00**

11/11/98

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

Name

ANDRES FLORES

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

1932 NE 118TH RD

Suite, Apt. #, Etc.

N. MIAMI

FL 33181

City

State

Zip Code

FL

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S.

Signature of
Registered Agent

[Signature]

REGISTERED AGENT MUST SIGN

Date **11-11-98**

11. This corporation owes or has paid the current year
Intangible Personal Property tax due June 30.

Yes ☐

No ☒

(See other side for information
on intangible tax.)

12. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE:

[Signature]

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

ANDRES FLORES

10-15-98

Date

Daytime Phone #

954-435-2765

CR200-0 (1/98)

November 9, 1998

Florida Department of State
Division of Corporations
PO Box 6327
Tallahassee Fl. 32314

Re: The Hair Engineer, Inc.
No. P93000060990

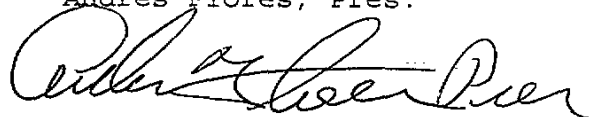
Gentlemen:

Please be advised that the 1994 and subsequent year Annual Reports were never received by the officers of subject corporation. They had relied on the original Registered Agent for all their business and tax matters. Said Agent had been remiss and the officers were totally unaware of these omissions.

Accordingly, please find enclosed our check in the amount of \$ 915.00 to cover the annual filings and reinstatement fees for the years in question. We trust this will be satisfactory.

Very truly yours,

Andres Flores, Pres.

A handwritten signature in dark ink, appearing to read 'Andres Flores', is written over a horizontal line.