2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT #

1. Entity Name

P93000065047

FILED Sep 30, 2002 8:00 am Secretary of State 09-30-2002 90182 046 ***150.00

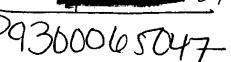
HAIR MA	AGIC, ETC	C., INC.			/					
Principal Place of Business 703 E OAKRIDGE RD ORLANDO FL 32809			Mailing Address 703 E OAKRIDGE RD ORLANDO FL 32809							
2. Principal l	Place of Busin	ness	3. Mailing Address			-				
Suite, Apt. #, etc.			Suite, Apt. #, etc.			DO NOT WRITE IN THIS SPACE				
City & State			City & State			4.	FEI Number 59-3197642		applied For lot Applicable	7
Zip Country		Country	Zip	Zip Country		5.	Certificate of Status Desired	\$8.75 Ac	ditional	7
		and Address of Current R				7	Name and Address of New Registered.	Agent		┪
WENZ, LISA M						 .			7-3×C7U	-
3512 E. KALEY AVE ORLANDO FL 32806					Street Address	(P.O.	Box Number is Not Acceptable)			
		•			City		FL	Zip Cod	de	$\frac{1}{2}$
8. The above the obliga	e named entit tions of regist	y submits this statement for t ered agent.	he purpose of changing its	registere	ed office or register	red aç	gent, or both, in the State of Florida. I am	familiar with	, and accept	1
SIGNATURE	Signature, typed	or printed name of registered egent end	d side if applicable. (NOTE	: Registered	2 Agent signature requires	J when r	roinstating) DATE			
9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)			FILE NOW!!! FEE IS \$550.00 After September 13, 2002 Fee will be \$750. Make Check Payable to Department of Sta			.00 te	Election Campaign Financing Trust Fund Contribution.		00 May Be d to Fees	
11.		OFFICERS AND DI	RECTORS	12.		<u>Α</u> Γ	DDITIONS/CHANGES TO OFFICERS AND	DIRECTOR	S INI 1.1	┥
TITLE NAME STREET ADDRESS CITY-ST-ZIP	E PD LANIER, CATHY E EET AODRESS 3811 LAKE MARGARET BLVD			TITLE NAME STREE	ı		- Indiana in the control of the cont	☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Defete			-		Change	☐ Addition	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	·		☐ Deleta	TITLE NAME STREET CITY-S	T ADDRESS	_	. •	☐ Change	Addition	
TITLE Name Street address City-St-Zip			☐ Delete	TITLE NAME STREET CITY-S	ADDRESS it-zip			☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Celeta	TITLE NAME STREET CITY-S	ADDRESS T-ZIP			☐ Change	Addition	

13. I hereby certify that the information supplied with this filling 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 Block 12 if changed, or on an attachment with an address, with all other like empowered.

8/25/02

467-851-1294

Attachment



Hair Magic Etc., Inc. 703 E. Oakrige Rd.

Orlando, F1. 32809-4204

Division of Corporations Uniform Business Report Filings P.O. Box 1500

-Tal-lahassee---F1----32302-1500-

To Whom It May Concern;

In filling out this bill and making a phone call to your office to find out some information, we were imformed that this was a second notice; we DID NOT receive the first notice of this bill. We were instructed by your office to go ahead and send the first notice fee of \$150.00 and the commission would decide to extend the final date or they would accept this payment in full. We have always paid our fee on schedule in the past and would have this time if we had received our first notice.

Thank you for your cosideration in this matter and we will be awaiting your desision.

If you needto contact us we can be reached at 407-851-1294 or 407-896-7822

Sincerely;

Cathy E. Lanier

President / Hair Magic Etc.Inc.

Attachment

P9300065047

HAIR MAGIC ETC, INC. 703 E. Oakridge Rd. Orlando, Fl. 32809-4204

F1. Department of State Dept. of Corporations P.O. Box 6327 Tallahassee, F1. 3214

To Whom This May Concern;

I am returning these papers as I was instructed by one of your employees, Eula. I received this notice that you did not get my check or could not locate it at the time of this letter. I am encloseing another check for \$150.00 to cover my corporation fee. I have stopped payment on the first check that was enclosed in all of my first corrospondence with your office and am now issuing a new check to you.

Once again thank you for your resolution of this matter.

Sincerely;

Cathy E. Lanier

Hair Magic Etc., inc. P9300065047

Carky C. Lancie

EIN # 59-3197642



FLORIDA DEPARTMENT OF STATE Jim Smith

Secretary of State

September 12, 2002

HAIR MAGIC, ETC., INC. 703 E OAKRIDGE RD ORLANDO, FL 32809

Subject: HAIR MAGIC, ETC., INC.

Reference Number:

P93000065047

Please be advised, we have received your annual report/uniform business report; however, the report <u>has not been filed</u> and a copy is being returned for the following correction(s):

The fee to file the enclosed profit annual report/uniform business report is \$150.00. If a certificate of status is desired, please add an additional \$8.75.

TO AVOID THE \$400.00 LATE FEE, PLEASE RETURN THE CORRECTED REPORT WITHIN 30 DAYS OF THE DATE OF THIS LETTER.

TO AVOID THE ADMINISTRATIVE DISSOLUTION/REVOCATION, PLEASE RETURN THE CORRECTED REPORT TO: DIVISION OF CORPORATIONS, P.O. BOX 1500, TALLAHASSEE, FLORIDA 32302-1500 WITHIN 30 DAYS OF THE DATE OF THIS LETTER.

If you have additional questions or need further assistance, please call the Division of Corporations at (850) 488-9000.

/JN

WWW.

Division of Corporations - P.O. BOX 6327 - Tallahassee, Florida 32314



FLORIDA DEPARTMENT OF STATE Jim Smith

Secretary of State

September 12, 2002

HAIR MAGIC, ETC., INC. 703 E OAKRIDGE RD ORLANDO, FL 32809

Subject: HAIR MAGIC, ETC., INC.

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ANNUAL REPORTS SECTION