

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Sep 17, 2002 8:00 am
Secretary of State

09-17-2002 90087 048 ***150.00

DOCUMENT # P93000070513

1. Entity Name
THE STRAND HAIR & NAILS, INC.

Principal Place of Business

**27420 OLD 41 RD
 BONITA SPRINGS FL 34135
 US**

Mailing Address

**27420 OLD 41 RD
 BONITA SPRINGS FL 34135
 US**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **59-3197104**

Applied For
 Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

DO NOT WRITE IN THIS SPACE



6. Name and Address of Current Registered Agent

**LAWHON, RONDA L
 27420 OLD 41 RD
 BONITA SPRINGS FL 34135**

7. Name and Address of New Registered Agent

Name **K. MICHAEL WALDOGH**
 Street Address (P.O. Box Number is Not Acceptable)
27420 OLD 41 RD
BONITA SPRINGS
 City **FL** Zip Code **34135**

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 **K. Michael Waldoogh V.P.**

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9/10/02

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 \$750.00
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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **P** ☒ Delete
 NAME **LAWHON, RONDA L**
 STREET ADDRESS **27420 OLD 41 RD**
 CITY-ST-ZIP **BONITA SPRINGS FL 34135**

TITLE **PRESIDENT** ☐ Change ☒ Addition
 NAME **DONNA M. ZYNEL**
 STREET ADDRESS **10821 GOODWIN**
 CITY-ST-ZIP **BONITA SPRINGS, FL 34135**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **V.P.** ☐ Change ☒ Addition
 NAME **K. MICHAEL WALDOGH**
 STREET ADDRESS **27420 OLD 41 RD**
 CITY-ST-ZIP **BONITA SPRINGS, FL 34135**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
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 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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 Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **K. MICHAEL WALDOGH**
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

9/10/02
 Date

239-495-5853
 Daytime Phone #

CR2E034 (4/02)



Attachment

P93000070513
125451

27420 Old 41 Road
Bonita Springs, Florida 34135
239-495-9853

9/10/02

TO WHOM IT MAY CONCERN.

THIS IS THE FIRST AND ONLY NOTICE WE RECEIVED
CONCERNING THIS MATTER.

BEING ADVISED, PER PHONE CONVERSATION ON THIS
DATE WITH YOUR OFFICE, THIS LETTER IS BEING
SENT WITH THE DOCUMENT # P93000070513.
ALSO THE ADVISED PAYMENT OF \$150.00 IS
INCLUDED. THANK YOU

U. T. F.

K. Michael W. W. W.

K. MICHAEL W. W. W.

U. P.