

# 2000 UNIFORM BUSINESS REPORT

Pg. 1 of 2  
FILED

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # **PA4000005346**

1. Entity Name

**Glenda's Hair Magic, Inc.**

Principal Place of Business

Mailing Address

**3615 Sahara Springs Blvd. 3615 Sahara Springs Blvd.**  
**Pompano Beach, FL 33069 Pompano Beach, FL**  
**33069**

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

**65-0459740**

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

7. Name and Address of New Registered Agent

**Laird, Glenda**  
**3615 Sahara Springs Blvd.**  
**Pompano Beach, FL 33069**

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

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 \$150.00**  
**After MAY 1, 2000 Fee will be \$550.00**  
**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 ☐ Delete  
NAME **D Laird, Glenda**  
STREET ADDRESS **3615 Sahara Springs Blvd.**  
CITY-ST-ZIP **Pompano Beach, FL 33069**

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS **600003215106--4**  
CITY-ST-ZIP **--04/19/00--01093--012**  
**\*\*\*\*300.00 \*\*\*\*300.00**

TITLE ☐ Delete  
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TITLE ☐ Change ☐ Addition  
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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:

**Glenda Laird**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**3-30-2000**

Date

**954 733-1906**  
Daytime Phone #

CR2E034 (9/99)

*Wachholder & Streimer, P. A.*  
*Certified Public Accountants*

*Barry L. Wachholder, C.P.A.*  
*Laura A. Streimer, C.P.A.*

*7501 Northwest 4th Street*  
*Plantation, Florida 33317*  
*(954) 584-2222*

May 3, 2000

Department of State  
Division of Corporations  
Annual Reports Section  
P.O. Box 1500  
Tallahassee, FL 32302-1500

RE: Glenda's Hair Magic, Inc.  
FEIN # 65-0459740

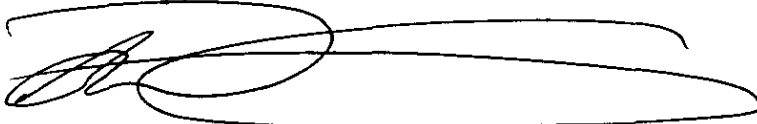
To Whom It May Concern:

Per previous conversations with your office the above referenced taxpayer has enclosed a check in the amount of \$300.00 made payable to the Department of State for their 1999 and 2000 corporate annual report.

The taxpayer's ex-husband previously handled all tax matters for Glenda Laird. It is apparent that the ex-husband ignored all correspondence addressed to her or her corporation. The taxpayer discovered unopened mail from our office which included the corporation's annual report. The corporation has a history of timely filed reports.

In consideration of these facts we respectfully request that all penalties be abated and the corporation be renewed for the 1999 and 2000 tax years. If this corporation cannot be reinstated for the \$300, please return the check and Ms. Laird will create a new corporation. If there remain any questions with regard to same or if we can be of further assistance, please do not hesitate to contact the undersigned directly.

Sincerely,



Barry L. Wachholder  
Certified Public Accountant

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