

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000029529

FILED
Apr 21, 2005
Secretary of State

Entity Name: POST HILLS BARBER SHOP INC.

Current Principal Place of Business:

5744 JOHNSON ST
HOLLYWOOD, FL 33024

New Principal Place of Business:

Current Mailing Address:

5744 JOHNSON ST
HOLLYWOOD, FL 33024

New Mailing Address:

FEI Number: 65-0578117

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

YOCK, JOHN
5744 JOHNSON ST
HOLLYWOOD, FL 33024 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: YOCK, JOHN
Address: 5744 JOHNSON ST.
City-St-Zip: HOLLYWOOD, FL 33024

Title: VP/T () Delete
Name: YOCK, LENA
Address: 5744 JOHNSON ST.
City-St-Zip: HOLLYWOOD, FL 33024

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JOHN YOCK

P

04/21/2005

Electronic Signature of Signing Officer or Director

_____ Date