

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P95000068493

1. Entity Name

JUST-NINCH HAIR-N-NAIL SALON, INC.

FILED

May 18, 2000 8:00 am  
Secretary of State

05-18-2000 90843 028 \*\*\*150.00

Principal Place of Business

Mailing Address

450 S. OLD DIXIE HWY., STE. #1  
JUPITER FL 33458

450 S. OLD DIXIE HWY., STE. #1  
JUPITER FL 33458-7483

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 65-0619390

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

ODELL, JENNIFER  
308 LIGHTHOUSE DR.  
PALM BEACH FL 33410

Name Odell, Jennifer

Street Address (P.O. Box Number is Not Acceptable)  
1207 CHEROKEE ST.

City Jupiter

FL

Zip Code 33458

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

*Jennifer Odell*

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

(NOTE: Registered Agent signature required when reinstating)

DATE

4/30/2000

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 P- Delete  
NAME INGRAM, SANDRA  
STREET ADDRESS 825 CENTER ST., APT. 37B  
CITY-ST-ZIP JUPITER FL

TITLE P-T-S Change ☐ Addition  
NAME Odell, Jennifer  
STREET ADDRESS 1207 CHEROKEE ST.  
CITY-ST-ZIP Jupiter, FL 33458

TITLE VP Delete  
NAME ODELL, JENNIFER  
STREET ADDRESS 308 LIGHTHOUSE DRIVE  
CITY-ST-ZIP PALM BEACH GARDENS FL

TITLE VP Change ☐ Addition  
NAME ODELL, HOWARD  
STREET ADDRESS 1207 CHEROKEE ST.  
CITY-ST-ZIP Jupiter, FL 33458

TITLE Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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

TITLE Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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

TITLE Delete 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:

*Jennifer Odell*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/30/00

Date

561-745-9988

Daytime Phone #

CR2E034 (9/99)