

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P96000013610

FILED
Jan 19, 2002 8:00 AM
Secretary of State

Entity Name: HILLVIEW HAIR FASHIONS, INC.

Current Principal Place of Business:

609 N WASHINGTON BLVD
SARASOTA, FL 34236 US

New Principal Place of Business:

Current Mailing Address:

609 N WASHINGTON BLVD
SARASOTA, FL 34236 US

New Mailing Address:

FEI Number: 65-0641784

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FORTIN, RONALD
5820 HELEN WAY
SARASOTA, FL 34237 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

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).

Election Campaign Financing Trust Fund Contribution ()

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: LESMERISES, MARY
Address: 7137 QUEEN PALM CIRCLE
City-St-Zip: SARASOTA, FL 34239

Title: D () Delete
Name: LESMERISES, JOSEPH C
Address: 7137 QUEEN PLAM CIRCLE
City-St-Zip: SARASOTA, FL 34243

Title: D () Delete
Name: FORTIN, RONALD
Address: 5820 HELEN WAY
City-St-Zip: SARASOTA, FL 34243

Title: D () Delete
Name: FORTIN, JANET E
Address: 5820 HELEN WAY
City-St-Zip: SARASOTA, FL 34243

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: LESMERISES, MARY
Address: 4424 GREENFIELD RD
City-St-Zip: SARASOTA, FL 34233 US

Title: D (X) Change () Addition
Name: LESMERISES, JOSEPH C
Address: 4424 GREENFIELD RD
City-St-Zip: SARASOTA, FL 34233

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: RONALD FORTIN

DIR

01/19/2002

Electronic Signature of Signing Officer or Director

Date