## 2004 FOR PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# P96000039159

Entity Name: MIMIE'S HOUSE OF BEAUTY, INC.

FILED Oct 19, 2004 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

3007 WEST CYPRESS AVENUE TAMPA, FL 33624

**Current Mailing Address: New Mailing Address:** 

3007 WEST CYPRESS AVENUE TAMPA, FL 33624

FEI Number: 59-3375662 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

MADISON, MIREILLE T MADISON, MIREILLE T 4747 WATERS AVE 4936 UMBER WAY S **APT 1503** APT 1503 TAMPA, FL 33614 US TAMPA, FL 33624 US

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: MIREILLE MADISON 10/19/2004

> Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Change () Addition Title: PST ( ) Delete

MADISON, MIREILLE T Name: Name: 4747 WATERS AVE APT 1503 Address: Address: City-St-Zip: TAMPA, FL 33614 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 Statutés. 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: MIREILLE MADISON OWN 10/19/2004