

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P96000048802

1. Entity Name  
UP-A-KUT UNISEX SALON, INC.

**FILED**  
**May 14, 2001 8:00 am**  
**Secretary of State**

05-14-2001 90103 049 \*\*\*150.00

Principal Place of Business  
3411 WEST OAKLAND PARK BLVD.  
FORT LAUDERDALE FL 33311

Mailing Address  
3411 WEST OAKLAND PARK BLVD.  
FORT LAUDERDALE FL 33311

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number 65-0666821

Applied For  
Not Applicable

Zip

Country

Zip

Country

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

TAYLOR, GROSSETT  
3335 PINEWALL DR N #202  
MARGATE FL 33063

Name TAYLOR, GROSSETT  
Street Address (P.O. Box Number is Not Acceptable)  
3121 N.W. 72nd Ave  
MARGATE  
City FL Zip Code 33063

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, 2001 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  
NAME TAYLOR, LOLA  
STREET ADDRESS 3335 PINEWALL DR N #202  
CITY-ST-ZIP MARGATE FL 33063 ☐ Delete

TITLE P  
NAME Lola TAYLOR  
STREET ADDRESS 3121 N.W. 72 Ave  
CITY-ST-ZIP MARGATE FL 33063 ☒ Change ☐ Addition

TITLE V  
NAME TAYLOR, EFFRAN  
STREET ADDRESS 7941 BELMONTE BLVD  
CITY-ST-ZIP MARGATE FL 33063 ☐ Delete

TITLE V  
NAME EFFRAN TAYLOR  
STREET ADDRESS 3121 N.W. 72 Ave  
CITY-ST-ZIP MARGATE FL 33063 ☒ Change ☐ Addition

TITLE D  
NAME TAYLOR, CACHETA  
STREET ADDRESS 3132 NW 72 AVE  
CITY-ST-ZIP MARGATE FL 33063 ☐ Delete

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

TITLE RM  
NAME TAYLOR, GROSSETT  
STREET ADDRESS 2029 NE 46AVE  
CITY-ST-ZIP LAUDERHILL FL 33373 ☐ Delete

TITLE RM  
NAME Grossett TAYLOR  
STREET ADDRESS 3121 N.W. 72 Ave  
CITY-ST-ZIP MARGATE FL 33063 ☒ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

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

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

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

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/00)