2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT #P96000053952

1. Entity Name
Zelma's Hair Studio, Incorporated

FILED
01 JUL 13 PM 3:59
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business	Mailing Address
6016 N. 40th St. Tampa, FL 33610	6016 N 40th St. Tampa, FL 33610

1999-2001 UBR

2. Principal Place of Business	3. Mailing Address
2901 E. Hillsborough Ave	PO Box 291816
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: TAMPA, FL	City & State: Tampa, FL
Zip: 33610 Country: USA	Zip: 33687 Country: USA

4. FEI Number: 59-3388332 ☐ 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
Zelma Brown 6016 North 40th Street	Name: David E. Pince Street Address (P.O. Box Number is Not Acceptable): 4519 Ashmore Dr. City: TAMPA FL Zip Code: 33610

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: David E. Pince 4-30-01
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 $500.00
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 / NAME / STREET ADDRESS / CITY-ST-ZIP	PSD Zelma Brown 6016 N. 40th St Tampa, FL 33610	☐ Delete	PSD Zelma Brown 4710 Ashmore Dr Tampa, FL 33610	☒ Change ☐ Addition
	same tracking number ~~##~~	☐ Delete	900004488689--4 -07/23/01--01002--013 ****150.00 ****150.00	☐ Change ☐ Addition
	150.00-AR	☐ Delete	900004488689--4 -07/23/01--01002--014 ****300.00 ****300.00	☐ Change ☐ Addition
	201.25-AR 10.00-ARARTS 88.75-ARSUPP (300.00)	☐ Delete		☐ Change ☐ Addition
		☐ Delete		☐ Change ☐ Addition
		☐ Delete		☐ Change ☐ Addition

CR2E034 (11/00)

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: Zelma Brown 4-30-01 813-231-2214
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #