2000 UNIFORM BUSINESS REPORT (UBR) **FILED** Aug 15, 2000 8:00 am Secretary of State DOCUMENT # **P96000081972** 1. Entity Name MAGIC BEAUTY SUPPLY, INC. 08-15-2000 90003 026 ***150.00 Principal Place of Business Mailing Address 1443 NE 163RD STREET THAT WE 163RD STREET NO MIAMI BEACH FL 33162 TIO MIAMI BEACH FL 99162 T114140014 2. Principal Place of Business 3. Mailing Address 1205-141 NE Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE -City & State N. Mrami City & State Applied For 4. FEI Number 65-0700355 Not Applicable Country 型3162 \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent 10 to 0 N.W 22 ds7 Street Address (P.O. Box Number is Not Acceptable) 17240 NW 64TH AVENUE #209 NO_MIAMFBEAGH*F1=33015 Pembroke pines F.L. 32026 10680 NW 2n 15+ Zio Code 2 6 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 (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE'IS \$550.00 9. This corporation is eligible to satisfy its Intangible 10.-Election Campaign Financing* \$5.00 May Be After SEPTEMBER 13, 2000 Min. will be \$750.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE ☐ Addition ☐ Delete TITLE 10680 NW 241 d St Pember Ke p: U.es, FL 33.26 Thinge Addition NAME HUH, SEUNG E NAME STREET ADDRESS STREET ADDRESS 1443 NE 183RD STREET CITY-ST-7IP CITY-ST-7IP NORTH-MIAMI-BEACH FL 33162 ☐ Delete TITLE LEE. DAE H NAME 10680 NW 24 d St pembooke pines, FL 37026 STREET ADDRESS 1440 NE: 163 9T-STREET ADDRESS CITY-ST-ZIP MIAMI BCH FL 33162 CITY-ST-7IP ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition TITLE Delete TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Change Addition ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change TITLE ☐ Addition TITLE ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP 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

Daytime Phone #

changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Aug. 1, 2000

Division of Corporation UBR P.O. BOX 1500 Tallahassee, FL 32302-1500

RE: Doc# 96000081972

Magic Beauty Supply, Inc.

Dear Sir,

We have not filed the UBR 2000. The reason is that we moved business and residence in 1999. Therefore, We never received the report. Now, to pay \$550.00 create a hardship on our business. Especially, our business is experiencing a very difficult time in 2000.

Could you please waiver the penalty since we moved and never received the report. There will be no more late in the future. Please accept the fee of \$150.00.

Thanks you for your cooperation in this matter.

Sincerely

Seung E.'ll President

Magic Beauty Supply, Inc.