FILED
May 05, 2003 8:00 am
Secretary of State

05-05-2003 90245 010 ***150.00

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P96000088017

1. Entity Name
L. & J. BEAUTY SALON, INC.

90123691

Principal Place of Business
L & J BEAUTY SALON INC
1028 NW 9TH AVENUE
FORT LAUDERDALE, FL 33311

Mailing Address
1028 NORTHWEST 9TH AVENUE
FORT LAUDERDALE, FL 33311

2. Principal Place of Business: Land J B Salon
Suite, Apt. #, etc.: 1028 N.W 9Th AVe
City & State: Fort Lauderdale
Zip: FLA 33311 Country

3. Mailing Address: 1028 N.W 9Th AVe
Suite, Apt. #, etc.: Ft Lauderdale
City & State: FLA
Zip: 33311 Country: Broward

☒ CHECK HERE IF MAKING CHANGES

4. FEI Number 65-0767920 — Applied For / Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
JOSEPH, RAYMONDE A
8000 NW 63RD CT
LAUDERHILL, FL 33311

7. Name and Address of New Registered Agent
Name: Luce Auguste
Street Address (P.O. Box Number is Not Acceptable): 2700 N.W 56 AVe
~~Lauderhill~~ FLA
City: APTE 301 FL Zip Code: 33313

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: Luce Auguste 4/27/03
SIGNATURE, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $150.00
After May 1, 2003 Fee will be $550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. ☐ $5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	P	☐ Delete
NAME	AUGUSTE, LUCKNER	
STREET ADDRESS	8000 NW 53RD CT	
CITY-ST-ZIP	LAUDERDALE, FL 33351	
TITLE	P	☐ Delete
NAME	LUCKMER, AUGUSTE	
STREET ADDRESS	8000 NW 53RD CT	
CITY-ST-ZIP	LAUDERDALE, FL 33351	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
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STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	President	☐ Change ☐ Addition
NAME	Luce Auguste	
STREET ADDRESS	2700 NW 56 AVe 33313	
CITY-ST-ZIP	Lauderhill FLA	
TITLE	APTE 301	☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
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STREET ADDRESS		
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TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

CR2E034 (10/02)

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Luce Auguste 4/27/03
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #