							e e e e e e e e e e e e e e e e e e e	
	PLEASE READ	FLORID	RUCTIONS A DEPARTMEN Sandra B. Mort Secretary of S IVISION OF CORPORE	NT OF STATE tham tate	ī	ING THIS FORM.	D	
DOCUMENT # P97000012865					98 NOV 23 PM 3: No			
Corporation Name THE BARBER SHOP, INC. OF CENTRAL FLORIDA					SECRETARY OF STATE TALLAHASSEE. FLORIDA			
Principal Place of Business Mailing Addi			ess					
			108 South Semoran BLVD. Winter Park Fl 32792					
If above addresses are incorrect in any way, line through Incorrect information and enter correction below.					1			
	ncipal Office Address, If Applicable	ng Office Address, If Applicable, Semorgy Blvd, 4. Date Inco			porated or Qualified iness in Florida 02/06/1997			
Suite, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. # City & State			Box 5364 5. FEIN			nber Applied For		
Zip Country Zip			Y Payk, FC, 6.			- 587	Not Applicable 5 Additional Fee required	
	and Street Addresses of Each Officer and/	32 10	13-5364	Ovange		OF STATUS DESIRED 2 6	r a Certificate of Status	
Title(s)	Name of Officers and/or Directors		Street Address of Each Officer and/or Director			City / State / Zip		
<u>1</u> D	ÒRIARTY, JAMES D		3 (Do NOT Use Post Office Box Numbers) 2296 BARBADOS DRIVE		imbers)	WINTER PARK FL 32792		
D	MORIARTY, CAROL E		2296 BARBADOS DRIVE			WINTER PARK FL 32792		
			7			7 00002698920 5 -12/01/9801012007 		
				<u> </u>	AR III	23/99	AL	
Name and Address of Current Registered Agent					Name and Address of New Registered Agent			
BUMED IMPER					nes D. Moriarty O. Box Number is Not Acceptable)			
5518 GENOA LANE				Street Address (P.O. Box Number is Not Acceptable) 2296 Bay bados Dr. Suite, Apt. Etc.				
ORLANDO FL 32807					State Zip Code			
10. I, being appointed the registered agent of the above name corporation, am familiar with and accept the obligations of Section 607.0505, F.S.							32793-5364	
Signature o Registered	Agent	GISTERED AC	ENT MUST SIGN			Date	-98	
11. This corporation owes or has paid the current year Intangible Personal Property tax due June 30. Yes No No (See other side for information on intangible tax.)								
this rein owed by	that I am an officer or director or the receiv statement application, the reason for clisso the corporation have been paid and the n application is true and accurate, and my sign	ution has been ames of individ	eliminated, the corpor uals listed on this form	rate name satisfies to n do not qualify for a	the requirements an exemption und	of section 607.0401 or 617.040	01, F.S., that all fees	
SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICE OR DIRECTOR Date Dayline Phone #								
	James I	D. Ma	wiatty	_			İ	

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Better Business Services, Inc.

Bookkeeping . Payroll Processing . Income Tax Preparation

November 18, 1998

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Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

Re The Barber Shop, Inc. of Central Florida Document #P97000012865

Dear Sir:

After calling your office and I believe talking to Mr. Glebes, he requested we write this letter stating why the first Annual Report was never received by The Barber Shop.

To begin with, if it was sent to the street address where there is no mailbox; mail is never delivered there. If it was sent the last registered agent, he never gave Mr. Moriarty the form.

The first notice he ever received was the one stating the dissolution of the corporation and as you can see from the copy of the envelope attached that it was forwarded to his post office box.

The above address is from my accountant, who helped me by calling the Div. Of Corporation and to explain what was going on.

Thanking you in advance for your consideration of reinstating my coporation for the normal fee of \$150, I remain

James D. Moriarty

vours

Very sincereAy