

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P97000051851

1. Entity Name

YOU AND I BEAUTY CONSULTANTS, INC.

FILED  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

01 SEP -4 PM 3:00

Principal Place of Business

17066 COLLINS AVENUE  
SUNNY ISLES BEACH,  
FL 33160

Mailing Address

P.O. Box 277688  
MIRAMAR, FL 33027-  
7688

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

65-0763695

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

MARIA A. CARDEVILA  
231 174th ST.  
SUNNY ISLES BEACH, FL 33160

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

Maria A. Cardevila

08/31/01

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 \$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  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
PD  
WILLIAM VIECCO  
17066 COLLINS AVENUE  
SUNNY ISLES BEACH, FL 33160

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
SD  
MARIA A. CARDEVILA  
231- 174th ST  
SUNNY ISLES BEACH, FL 33160

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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☐ Change ☐ Addition

TITLE  
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CITY-ST-ZIP

☐ Change ☐ Addition

TITLE  
NAME  
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CITY-ST-ZIP  
300004583433-7  
-09/11/01-01080-006  
\*\*\*\*300.00 \*\*\*\*300.00

☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Change ☐ Addition

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CITY-ST-ZIP

☐ Change ☐ Addition

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STREET ADDRESS  
CITY-ST-ZIP

☐ Change ☐ Addition

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:

Maria A. Cardevila

08/31/01

954-457-0970

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

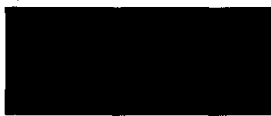
Date

Daytime Phone #

CR2E034 (11/00)

P97002

**You and I Beauty Consultants, Inc.**



P.O. BOX 277688  
Miramar, FL 33027-7688  
954-457-0970  
Fax 954-457-0971

August 31, 2001

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

To Whom It May Concern:

Re: You and I Beauty Consultants, Inc.  
Document Number P97000051851

Dear Sir or Madam:

The above corporation never received an annual report notice or form for 2000 and 2001. Based upon a telephone conversation with one of your representatives last week, I was advised that the corporation pay the \$300 in filing fees and fill out a 2001 Uniform Business Report form. In the future, I would like to receive this report at the P.O. Box listed above and as designated on the form.

Thank you for your kind attention in this matter.

If you should have any questions, please don't hesitate to contact me.

Sincerely yours,

Thomas R. Herrera  
For the Firm

cc: Maria A. Capdevila