

2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 24, 2007 8:00 am
Secretary of State

04-24-2007 90019 040 ***150.00

DOCUMENT # P97000055952

1. Entity Name

DIAMOND'S HAIR STUDIO, INC.



Principal Place of Business
2910 N.W. 13TH ST.
GAINESVILLE FL 32609

Mailing Address
2910 N.W. 13TH ST.
GAINESVILLE FL 32609



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Diamond's Hair Studio *Diamond's Hair Studio*

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5001-D N.W. 34th St. *2910 N.W. 13th St.*

Gainesville FL *Gainesville FL*

City & State

City & State

Zip

Country

Zip

Country

32605 *Alachua*

32653 *Alachua*

1st MOORE

CR2E034 (10/06)

4. FEI Number **59-3468742**

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

DIAMOND, GRACIE M
2910 N.W. 13TH ST.
GAINESVILLE FL 32609

Name

Diamond Gracie M

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

2910 N.W. 13th St

City

Gainesville

FL

Zip Code

32653

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

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, 2007 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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY - ST - ZIP
D
DIAMOND, GRACIE M
2910 N.W. 13TH ST.
GAINESVILLE FL 32609

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE ☐ Delete
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TITLE ☐ Delete
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY - ST - ZIP
Diamond Gracie M
5001-D N.W. 34th St
Gainesville FL 32605

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE ☐ Change ☐ Addition
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TITLE ☐ Change ☐ Addition
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CITY - ST - ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY - ST - ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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:

Gracie M. Diamond
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4-17-07 352-378-2074