

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P97000073416

1. Entity Name

JACKSONVILLE HAIR REPLACEMENT, INC.

FILED
Apr 18, 2000 8:00 am
Secretary of State

04-18-2000 90239 002 ***150.00

Principal Place of Business

Mailing Address

9770 BAYMEADOWS ROAD
STE. 101
JACKSONVILLE FL 32256

8221-10 SOUTHSIDE BLVD.
JACKSONVILLE FL 32256-0716

2. Principal Place of Business

3. Mailing Address

1584 Roswell Rd

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State
Marietta GA

4. FEI Number 59-3463131

Applied For
Not Applicable

Zip

Country

Zip

Country

30062

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

BHARTI, DESAI CPA
1589 RUSWELL RD
MARIETTA GA 30067
GA-30062

Name

JoAnn Hutchinson

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

9770 Old Baymeadows Rd
Suite # 101

City

Jacksonville

FL

Zip Code

32256

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

Bhanti

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

3/26/00

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, 2000 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 D
NAME HUTCHINSON, JOANN
STREET ADDRESS 7910 LOS ROBLES CT
CITY-ST-ZIP JACKSONVILLE FL 32256 ☐ Delete

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

TITLE D
NAME JOYNER, JOHN
STREET ADDRESS 7861 LA SIERRA CT
CITY-ST-ZIP JACKSONVILLE FL 32256 ☐ Delete

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

TITLE D
NAME DESAI, BHARTI
STREET ADDRESS 1584 ROSWELL RD
CITY-ST-ZIP MARIETTA GA 30062 ☐ Delete

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

TITLE ☐ Delete
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STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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CITY-ST-ZIP

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

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:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Bhanti

3/26/00 970-321-9798
Date Daytime Phone #

CR2E034 (9/99)