

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P97000673451

1. Entity Name

Principal Place of Business

MOTOWN NAILS, INC

Mailing Address

1605 N.W 183<sup>RD</sup> ST

2. Principal Place of Business

MOTOWN NAILS, INC

3. Mailing Address

1605 N.W 183<sup>RD</sup> ST

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Miami, Fla

City & State

Miami, Fla

Zip

33169

Country

U.S.A

Zip

33169

Country

U.S.A

4. FEI Number

05,0777927

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

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

Raynette L. Burke

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 \$550.00  
After September 12, 2001 Fee will be \$750.00  
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

TITLE NAME STREET ADDRESS CITY-ST-ZIP

OWNER  
Raynette Burke  
1605 N.W 183<sup>RD</sup> ST  
Miami, Fla 33169

☐ Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP

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TITLE NAME STREET ADDRESS CITY-ST-ZIP

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12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP

900004705999-4  
-12/05/01--01053--002  
\*\*\*150.00 \*\*\*150.00

☐ Change ☐ Addition

TITLE NAME STREET ADDRESS CITY-ST-ZIP

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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:

Raynette L. Burke

10-4-01

305-474-0102

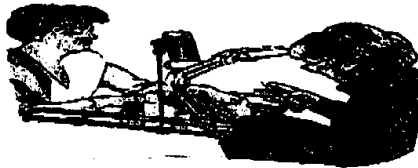
FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
01 NOV 14 PM 3:44

ALL INFORMATION  
HEREON IS UNCLASSIFIED  
DATE 01-11-01 BY 60324

DO NOT WRITE IN THIS SPACE

CR02034 (5/01)

Motown Nails, Inc.  
1605 NW 183<sup>rd</sup> Street  
Miami, Florida 33169  
(305) 474-0102



October 11, 2001

To: State of Florida  
Division of Corporation  
P.O. Box 6327  
Tallahassee, Florida 32314  
From: Raynette Burke-Owner of Motown Nails, Inc.  
Re: Renewal of Articles of Incorporation

To Whom It May Concern:

On September 27, 2001, I spoke with a clerk in reference to renewing my company's articles of incorporation. I brought to the clerks' attention that I never received my renewal packet. I was then instructed to write this letter informing your organization of such and to send with the letter an accompanying check for the renewal fee of \$150.- Please accept these documents and feel free to contact at (305) 474-0102 for any questions.

Sincerely,

Raynette Burke  
Owner-Motown Nails, Inc.