

2001 UNIFORM BUSINESS REPORT (UBR)

FILED

Apr 23, 2001 8:00 am
Secretary of State

04-23-2001 90101 048 ***158.75

DOCUMENT # P97000074916

1. Entity Name
CUTS USA CORPORATION

Principal Place of Business

**1726 79TH ST CAUSEWAY
#319
NO BAY VILLAGE FL 33141
US**

Mailing Address

**1726 79TH ST CAUSEWAY
#319
NO BAY VILLAGE FL 33141
US**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **65-0783510**

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

**CONSTANTE, SONIA
9759 SW 77 AVE., #303
MIAMI FL 33126**

Name

Kevin Balboa

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

995 NE 78th St

City

Miami

FL

Zip Code

33138

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 **Kevin Balboa**

04-09-01

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 **P** ☒ Delete
NAME **CONSTANTE, SONIA**
STREET ADDRESS **9759 SW 77 AVE #303**
CITY-ST-ZIP **MIAMI FL 33126**

TITLE **P** ☒ Change ☐ Addition
NAME **Kevin Balboa**
STREET ADDRESS **995 NE 78th St**
CITY-ST-ZIP **Miami FL 33138**

TITLE **SVP** ☐ Delete
NAME **BALBOA, KEVIN**
STREET ADDRESS **7825 NE BAYSHORE CT., #306**
CITY-ST-ZIP **MIAMI FL 33138**

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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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: **Kevin Balboa**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04-09-01 (305)756-3759

Date

Daytime Phone #

CR2E034 (10/00)