## 2000 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

## DOCUMENT # P97000075273 Jul 21, 2000 8:00 am 1. Entity Name **Secretary of State** THE ULTIMATE LOOK, INC. 07-21-2000 90160 030 \*\*\*150.00 Mailing Address Principal Place of Business 15200 SOUTH U. S. 41 15200 SOUTH U. S. 41 PLYMOUTH CENTER. SUITE 105 PLYMOUTH CENTER, SUITE 105 FORT MYERS FL 33908 FORT MYERS FL 33908 3. Mailing Address 2. Principal Place of Business DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Apt. #. etc Applied For 4. FEI Number City & State 65-0828231 Not Applicable \$8.75 Additional Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name RUVOLO, MICHAEL J Street Address (P.O. Box Number is Not Acceptable) 14391 HAMPTON LAKES COURT FORT MYERS FL 33908 Zip Code City 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 DATE (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable. FILE NOW!!! FEE IS \$550.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After SEPTEMBER 13, 2000 Min. will be \$750.00 Added to Fees Tax filing requirement and elects to do so. Trust Fund Contribution. Make Check Payable to Department of State П (See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. ☐ Addition TITLE Auvolo ☐ Delete Michael TITLE NAMÉ RUVOLO, MICHAEL J Twin Eagle Ln NAME STREET ADDRESS 14391 HAMPTON LAKES COURT STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP FORT MYERS FL 33908 ☐ Addition ☐ Change Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP - 🖃 Change- -- 🛄 Addition TITLE Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition ☐ Change TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition Delete TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition TITLE Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 13. I hereby certify that the information supplied with this filling 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

7-18-00

To whom it May Concern.

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ULTIMATE

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A · TOTAL · SALON,

We at the vitimate

Look did not receive our "UBR" with

the January mailing .- I called the Division

of Corporations on 7-18-00 and was

advised for send a check For \$ 180.00

and mall lite to this address.

Thank 400 Michael J. Rurdo