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2006 FOR PROFIT CORPORATION REINSTATEMENT

FILED

06 JUN 23 PM 1:14

SECRET
DALLAS, TEXAS

DOCUMENT # P98000036004					
1. Entity Name PREMIER HAIR DESIGNS, INC.					
Principal Place of Business 888 EAST COAST AVE LANTANA, FL 33462 US			Mailing Address 888 EAST COAST AVE LANTANA, FL 33462 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 65-0829868				Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐				8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent FAIRCLOUGH, MICHAEL J 2845 N. MILITARY TRAIL, STE. 8 WEST PALM BEACH, FL 33409			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. 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 \$900.00					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY- ST- ZIP	D UGALDE, SILVANA 888 EAST COAST AVE LANTANA, FL 33462 ☐ Delete		TITLE NAME STREET ADDRESS CITY- ST- ZIP	U00000562624 05/19/06-80062-023 150.00 ☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY- ST- ZIP	D UGALDE, CARLOS L 888 EAST COAST AVE LANTANA, FL 33462 ☐ Delete		TITLE NAME STREET ADDRESS CITY- ST- ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY- ST- ZIP	☐ Delete		TITLE NAME STREET ADDRESS CITY- ST- ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY- ST- ZIP	☐ Delete		TITLE NAME STREET ADDRESS CITY- ST- ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY- ST- ZIP	☐ Delete		TITLE NAME STREET ADDRESS CITY- ST- ZIP	000077137010 07/07/06--01021--022 ***150.00 ☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY- ST- ZIP	☐ Delete		TITLE NAME STREET ADDRESS CITY- ST- ZIP	☐ Change ☐ Addition	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 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: <u><i>[Signature]</i></u> 5/1/06 1 (561) 585-8888 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #					

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To: Whom it may concern

I Received your letter From 5/23/06.
The Balance you say I owe, which is
750.00 will cause my Business
hardship.

Please Abate the fees or penalties, due
to the Reason that I've never been late
with Renewal of my Corporation. I did not
Receive the Renew form in 2005!

Please consider my Request and
abate the penalties.

Thank You Very Much!

Silvana Ugaldé