

**FOR PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

FILED

02 NOV -6 PM 12:40

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # **P48000076406**

1. Entity Name

**Attitudes, inc. A Salon**

**DO NOT WRITE IN THIS SPACE**

2. Principal Place of Business

**801 South Washington St**

3. Mailing Address

**801 South Washington St**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

**Perry FL**

City & State

**Perry FL**

Zip

**32347**

Country

**USA**

Zip

**32347**

Country

**USA**

4. FEI Number

**59-3535344**

Applied For

Not Applicable

5. Certificate of Status Desired

☐

**\$8.75 Additional  
Fee Required**

7. Name and Address of Current Registered Agent

Name **Alana B Massey**

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

**3635 CASH ROAD**

City **Perry**

**FL**

Zip Code

**32348**

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

**Alana B Massey President**

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

(NOTE: Registered Agent signature required when rechartering)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)

☐

**January 1 - May 1 Fee is \$150.00**

**After May 1, Fee is \$550.00**

**Amended UBR is \$61.25**

**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  
**P Massey, Alana B  
3635 CASH Rd  
Perry FL 32348**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

**400002168054  
11/22/02-01041-012 \*\*150.00**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**S Baumgardner Barbara C  
147 King Fisher Lane  
Perry FL 32348**

TITLE  
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**DO NOT WRITE  
IN THIS SPACE**

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 on an attachment with an address with all other like empowered.

SIGNATURE:

**Alana B Massey President**

Date

Daytime Phone #

**850-584-3131**

CR2E034B (12/01)

October 17, 2002

Florida Department of State  
Division Of Corporations  
P O Box 1500  
Tallahassee, Floirda 32302-1500

RE: UBR for Doc#P98000076406  
Attitudes Inc. A Salon

Dear Sirs/Madam

I am enclosing the UBR for the above referenced corporation. Enclosed is the normal fee of \$150.00.

I know that this report is normally due in May of each year. My bookkeeper discovered that this form had not been filed when putting some information together from last years records. To my knowledge I did not receive a UBR form for this year.

We have had some problems with receiving our mail in the last six months.

I am asking that you please waive any penalty for filing late. I have always file my UBR Form on time since the start of my business in 1998.

Thank you for this consideration.

Sincerely Yours,



Alana B. Massey  
President

Attitudes, Inc. A Salon  
801 S. Jefferson St.  
Perry, Florida 32347