## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT # P99000017014

1. Entity Name

MU-LIFE UNISEX BEAUTY SALON, INCORPORATED



FILED
Mar 24, 2005 08:00 AM
Secretary of State

Principal Place of Business 4121 N. STATE ROAD 7 LAUDERDALE LAKES, FL 33319 Mailing Address

4121 N. STATE ROAD 7 LAUDERDALE LAKES, FL 33319



DO NOT WRITE IN THIS SPACE

03092005 No Chg-P CR2E034 (10/03)

4. FEI Number 65-0911954 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

RIGG, HORTENSE 4121 N. STATE ROAD 7 LAUDERDALE LAKES, FL 33319

## DO NOT WRITE IN THIS SPACE

	named entity submits this statement for the pions of registered agent.	urpose of changing its registere	d office or r	egistered agent, or bo	oth, in the State of Florida. I am familiar with, and accept
SIGNATURE Signature, typed or printed name of registered agent and file it applicable (NOTE Registered Agent signature required wher reinstating)  OATE					
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00  9. Election Campaign Finance Trust Fund Contribution.			cing	\$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP RIGG, HORTENSE 2431 NW 55TH TERR LAUDERHILL, FL 33313			U00000274661	
TITLE NAME STREET ADDRESS CITY-ST-ZIP					⊓3/24/05-80022-001 150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN .	THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE NAME STREET ADDRESS CITY-ST-ZIP					

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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE:** 

SIGNATURE AND TYPED OR PRINTED HANGE OF SIG

NG OFFICER OR DIRECTOR

3-21.05 94 677,9464

Baytimo Phone #