

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000048269

1. Entity Name

QUEEN BEAUTY SUPPLY, INC.

Principal Place of Business

3259 DAVIE BOULEVARD
SUITE A
FORT LAUDERDALE FL 33312

Mailing Address

3259 DAVIE BOULEVARD
SUITE A
FORT LAUDERDALE FL 33312

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

65-0926815

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

SPIEGEL & UTRERA, P.A.
343 ALMERIA AVENUE
CORAL GABLES FL 33134

7. Name and Address of New Registered Agent

Name: YOUNES REZKALLAH

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

3259 DAVIE BLVD

City

FT. LAUDERDALE

FL

Zip Code

33312

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

[Signature]

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 \$550.00
After SEPTEMBER 13, 2000 Min. will be \$750.00
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

TITLE: PVST
NAME: REZKALLAH, YOUNES
STREET ADDRESS: 3259 DAVIE BOULEVARD
CITY-ST-ZIP: FORT LAUDERDALE FL 33312

☐ Delete

TITLE: ☐ Delete
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STREET ADDRESS: ☐ Delete
CITY-ST-ZIP: ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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STREET ADDRESS: ☐ Change ☐ Addition
CITY-ST-ZIP: ☐ Change ☐ Addition

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:

[Signature] REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/18/00

Date

954-321-9666

Daytime Phone #

07-24-2000 90016 045 ***150.00
FILED P99000048269

SECRETARY OF STATE
DIVISION OF CORPORATIONS

00 NOV 20 PM 7:00



DO NOT WRITE IN THIS SPACE

CR2 034 11/00

2

QUEEN BEAUTY SUPPLY INC
3259 DAVIE BLVD # A
FT.LAUDERDALE FL 33312

STATE OF FLORIDA
DIVISION OF CORPORATIONS
P.O BOX 6327
TALLAHASSEE, FL 32314

November 4, 2000

REF: UNIFORM BUSINESS REPORT
QUEEN BEAUTY SUPPLY INC
DOCUMENT #P99000048269

DEAR SIR/MADAM

Please be advised that I did not receive the preprinted /original Uniform Business Report for year 2000 . Please accept my original check in the amount of \$150.00 as I was Not aware of the report and did not receive one.

Thank you in advance for your cooperation in this matter.

Sincerely yours

Younis Rezkallah
President