## 2000 UNIFORM BUSINESS REPORT (UBR) **FILED** May 08, 2000 8:00 am Secretary of State OCUMENT # P99000062592 05-08-2000 90020 048 \*\*\*158.75 THE LASERWORKS HAIR REMOVAL CENTER, INC. Mailing Address rincipal Place of Business 5975 N. Federal Hwy. #136 5975 N. Federal Hwy. rt. Lauderdale. FL 33308 #136 Ft. Lauderdale, FL 13 33308 2. Principal Place of Business 2480 East Commercial Blvd. <u> 2480 East Commercial</u> BlvdDO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Suite 1 Suite 1 Applied For City & State City & State 65-094 Not Applicable <u>Ft. Lauderdale. FI</u> Ft<u>. Lauderdale, FI</u> \$8.75 Additional Country 5. Certificate of Status Desired Fee Required USA 33308 33308 USA 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name <u> Leonard Zuzchik</u> Florida Registered Agents, Inc. Street Address (P.O. Box Number is Not Acceptable) 2480 East Commercial Blvd. 1940 Harrison St. #203 Hollywood, FL 33020 Ft. Lauderdale for the purpose of changing its registered office or registered agent, or both, in the State of Florida The above named entity submits this statement EONDRO H. ZUZCHIK FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2000 Fee will be \$550,00 Tax filing requirement and elects to do so. Trust Fund Contribution Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 11. **X**Change TITLE TITI F D NAME NAME Leonard Zuzchik Leonard Zuzchik STREET ADDRESS STREET ADDRESS 5975 N. Federal Hwy. #136 2480 East Commercial Blvd.#1 Ft. Lauderdale, FL 33308— CITY-ST-ZIP CITY-ST-7IP Ft. Lauderdale, FL 33308 Tchange TITLE TITLE NAME NAME Marianne Scully Marianne Scully STREET ADDRESS STREET ADDRESS 5975 N. Federal Hwy. #136 2480 East Commercial Blvd. #1 CITY-ST-ZIP CITY-ST-7IP Ft. Lauderdale, FL 33308 Ft. Lauderdale, FL-33308 Channe TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Addition ☐ Change ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change Addition Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition - - 🔲 · Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP 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. Leonard Zuzchik SIGNATUREZ