

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000064710

1. Entity Name

PROFESSIONAL FADES, INC.

FILED
Aug 08, 2000 8:00 am
Secretary of State

08-08-2000 90089 033 ***150.00

Principal Place of Business

9151 TAFT STREET
 PEMBROKE PINES FL 33024

Mailing Address

9151 TAFT STREET
 PEMBROKE PINES FL 33024

80071868



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

65-0937523

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

CURRY, DANNY A
 8540 N. SHERMAN CIRCLE #407
 MIRAMAR FL 33025

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.

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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **D** ☐ Delete
 NAME **CURRY, DANNY A**
 STREET ADDRESS **8540 N. SHERMAN CIRCLE #407**
 CITY-ST-ZIP **MIRAMAR FL 33025**

TITLE **D** ☒ Change ☐ Addition
 NAME **CURRY, DANNY A**
 STREET ADDRESS **2980 NW 203 Terr.**
 CITY-ST-ZIP **MIAMI, FL 33056**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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

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

1 Aug 00 (954) 442-5752

Date

Daytime Phone #

CR2E034 (5/00)

Attachment
Doc #
P 99000064710
A0071868

Professional Fades Barbershop

◆◆◆
9151 Taft Street ◆ Pembroke Pines Florida 33024
Phone 954-442-5752 ◆ Fax 305-430-8761

July 31, 2000

Department of State

Re: UBR

To whom it may concern,

As a follow-up, I spoke with one of your Representatives and a check is enclosed for \$150.00. Recently I received a UBR form to sign and send \$550.00, I then called your office to find that \$400.00 was for a late fee. I explained to the representative that I never received the original bill of \$150.00 and this was my first year in business and I was very unclear of the situation. She informed me to send \$150.00 with a letter enclosed.

Thank you for your cooperation regarding this matter.

Sincerely,

Danny A. Curry

D. A. Curry
(954) 442-5752