

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Sep 11, 2002 8:00 am
Secretary of State

09-11-2002 90120 028 ***550.00

DOCUMENT # P99000074036

1. Entity Name
RIO II SOBE SALON, INC.

Principal Place of Business

233 1ST STREET
 MIAMI FL 33139

Mailing Address

233 1ST STREET
 MIAMI FL 33139



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

Rio II Sobe Salon, Inc

Suite, Apt. #, etc.
233 1st Street Suite 2

City & State
Miami Beach, Florida

Zip Country
33139 USA

3. Mailing Address

1800 DAYTONIA ROAD

Suite, Apt. #, etc.
Miami Beach

City & State
Florida

Zip Country
33141 USA

4. FEI Number **65-0942442**

Applied For
 Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

MONTEIRO, NEUZA T
233 1ST STREET
MIAMI FL 33139

7. Name and Address of New Registered Agent

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. I am familiar with, and accept the obligations of registered agent.

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, 2002 Fee 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 **D** ☒ Delete
 NAME **MONTEIRO, NEUZA T**
 STREET ADDRESS **3067 SW 179TH AVENUE**
 CITY-ST-ZIP **MIRAMAR FL 33028**

TITLE **D** ☐ Delete
 NAME **MONTEIRO, FABIANA**
 STREET ADDRESS **1800 DAYTONIA RD.**
 CITY-ST-ZIP **MIAMI FL 33141**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **D** ☒ Change ☐ Addition
 NAME **Neuza Monteiro**
 STREET ADDRESS **1800 DAYTONIA ROAD**
 CITY-ST-ZIP **Miami Beach, FL. 33141**

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

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

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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:

Neuza Monteiro
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

(305) 538-8830

CR2E034 (4/02)