

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000085077

1. Entity Name

NAIL EXPRESSIONS, INC.

**FILED**  
**Sep 12, 2000 8:00 am**  
**Secretary of State**

09-12-2000 90017 011 \*\*\*150.00

Principal Place of Business

3610 NW 73 AVE.  
LAUDERHILL FL 33319

Mailing Address

3610 NW 73 AVE.  
LAUDERHILL FL 33319



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

10345 Royal Palm Blvd  
Suite, Apt. #, etc.

Coral Springs FL

City & State

33065 Broward

Zip Country

33065 USA

3. Mailing Address

10345 Royal Palm Blvd  
Suite, Apt. #, etc.

Coral Springs, FL.

City & State

33065 Broward County

Zip Country

33065 USA

4. FEI Number

650954719

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

STORCH, HERBERT F  
120 SOUTH UNIVERSITY DRIVE  
PLANTATION FL 33324

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.

SIGNATURE

*[Signature]*

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

95.00

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 PD  
NAME PERLMAN, PATTI  
STREET ADDRESS 3610 NW 73 AVE.  
CITY-ST-ZIP LAUDERHILL FL 33319

☐ Delete

TITLE VSTD  
NAME PERLMAN, KERRI  
STREET ADDRESS 3610 NW 73 AVE.  
CITY-ST-ZIP LAUDERHILL FL 33319

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Delete

TITLE  
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CITY-ST-ZIP

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CITY-ST-ZIP

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TITLE  
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STREET ADDRESS  
CITY-ST-ZIP

☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Change ☐ Addition

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TITLE  
NAME  
STREET ADDRESS  
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

Date

Daytime Phone #

CR2E034 (5/00)

attachment  
P 99/0000 85071  
B0106040

Dear Sir:

I just spoke with your Division who suggested I write to you regarding the enclosed fee due.

We applied for a Corporation as Nail Mania in Oct. 1999 & within 2 days or so applied for another name which we currently operate under "Nail Expressions".

We also gave the new address of business as 10345 Royal Palm Blvd - Coral Springs. For some

reason the address change did not happen & thus form in Jan. 2000 was mailed to my home address

where I haven't been living due to being separated with my husband. Therefore, we are requesting

your understanding regarding the additional \$400 you charge due to not paying. We are

attachment

P99 0000 85077

B0106040

Please change address

Thank you

attachment

P99 0000 85077