

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Sep 14, 2000 8:00 am
Secretary of State
09-14-2000 90005 018 ***150.00

00085933

DO NOT WRITE IN THIS SPACE

DOCUMENT # P99000087775

1. Entity Name

R.L.B. Beauty Corporation

Principal Place of Business

3748 N.E. 12th Avenue
Fort Lauderdale Fl

Mailing Address

3748 N.E. 12th Avenue
Fort Lauderdale Fl

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

65-087780

Applied For

Not Applicable

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

Joseph A. Vecchio, Jr.

BEGGS & VECCHIO

ATTORNEYS AT LAW

Penthouse Suite A

2929 E. Commercial Blvd.-Ft. Laud. 33308

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 \$150.00
After MAY 1, 2000 Fee will be \$550.00
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 ☐ Delete
NAME **D**
STREET ADDRESS **Rosa Betty Casterot**
CITY-ST-ZIP **3748 N.E. 12th Avenue**
Fort Lauderdale Fl

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

TITLE ☐ Delete
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: **ROSA BETTY CASTEROT**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

9-12-00
Daytime Phone #

CR2E034 (9/99)

Attachment
D#P9900008775
00085933

Division Of Corporations
Uniform Business Report Filings
P.O. Box 1500
Tallahassee, Fl. 32302-1500

To Whom It May Concern:

I am writing this letter on behalf of a new client,
R.L.B. Beauty Corporation (65-0957480), who never
received an initial annual report.

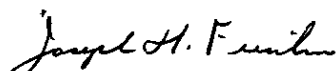
Upon realizing this fact, when they were referred to
me, a blank copy was requested and is now being filed
as soon as it was received.

We were advised, upon contacting your office, to submit
the one hundred and fifty dollar payment along with the
above copy.

We respectfully request that this payment be accepted, and
R.L.B. Beauty Corporation remain an active corporation in
the state of Florida.

Thank you very much for your kind consideration.

Sincerely yours,


Joseph H. Friedman
Tax Accountant