2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P99000099432 1. Entity Name HIS & HERS TATTOOS INC dalrarr. Principal Place of Business Mailing Address **4938 W COLONIAL DRIVE** 4938 W COLONIAL DRIVE ORLANDO, FL 32808 ORLANDO, FL 32808 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 06082007 Cha-P CR2E034 (12/06) Applied For City & State City & State 4 FELNumber 59-3621745 Not Applicable Country Zip Country Zip \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent HOWARD, MELISSA Street Address (P.O. Box Number is Not Acceptable) 4938 W COLONIAL DRIVE ORLANDO, FL 32808 City 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. + am familiar with, and accept the obligations of registered agent SIGNATURE. (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 In accordance with s. 607.193(2)(b), F.S., the Trust Fund Contribution corporation did not receive the prior notice. Due by September 14, 2007 Added to Fees 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. TITLE Oelete TITLE Change Addition HOWARD, ROBERT NAME NAME STREET ADDRESS 2155 W COLONIAL DRIVE STREET ADDRESS CITY ST ZIP ORLANDO, FL 32804 CITY ST-ZIP TITLE ☐ Delete TITLE Change Addition HOWARD, MELISSA NAME NAME 4938 W COLONIAL DR #C STREET ADDRESS STREET ADDRESS CITY-ST-ZIP ORLANDO, FL 32808 CITY-ST-ZIP TITLE ☐ Delete TITLE Change Change ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY - ST - ZIP CITY-ST-ZIP Delete TITLE Change ☐ Addition TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY ST-ZIP ☐ Delete Change ☐ Addition TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY ST ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered. SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OF DIRECTOR Оизв Daytme Phone

FILED

Jul 16, 2007 8:00 am Secretary of State

ATTACHMENT. 40125117 Division of Corporations

Annual Report

Document Number
P99000099432
Business Entity Name
HIS & HERS TATTOOS INC

After May 1st of each year, a late charge of \$400.00 is imposed, except in circumstances in which the entity did not receive prior notice. Please check this box if filing after May 1st and notice was not received.

FEI Number			593621745		
FEI Number Status			Listed Above	O Applied	For O Not Applicable
Certificate of Status	Desired		Yes O No	\$8.75 each	
Election Campaign	Financing Trust Fun	d Contribution	ı 🔾 Yes 🏵 No		
	Pri	ncipal Pla	ice of Busines	S	
	Address	4938 W CO	LONIAL DRIVE		
	Suite, Apt. #, etc.	С	***************************************		
	City, State	ORLANDO	<u>, , , , , , , , , , , , , , , , , , , </u>	, FL	
	Zip Code & Country	y 32808			
		Mailing	Address		
Address		4938 W CO	LONIAL DRIVE		
	Suite, Apt. #, etc.	С		······································	***Saleseor
	City, State	ORLANDO		, FL	
	Zip Code & Country	y 32808			
	Name and	d Address	of Registered	d Agent	
Name (Last,	First, Middle, Title)	HOWARD	MELIS	SA ,	7)
	- OR -				
Business to s	erve as RA				
Address (PC	Box is not acceptab	le) <mark>4938 W C</mark>	OLONIAL DRIVE		
Suite, Apt. #,	etc.	[<u></u>	Nessent account

Division	of Corporation	5
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ATTACHMENT

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ORLANDO	
32808	US

FL # 19900099432

If there is a change in registered agent, the new agent will need to type their name in the 'Registered Agent Signature' block below to accept the designation of registered agent. RA signature must be an individual name. If the RA is a business entity, an individual must sign on their behalf. A business entity cannot serve as its own RA.

Registered Agent Signature MELISSA HOWARD

This signature must be that of the individual "signing" this document electronically or be made with the full knowledge and permission of the individual, otherwise it constitutes **forgery** under s.831.06, Florida Statutes.

Officer/Director Name and Address

Our database can hold up to 6 officers/directors. If more than 6 officers/directors need to be made a part of the record, you cannot file the annual report online. You will need to download an annual report and list the additional officers/directors, title(s), name, and address on an attachment.

Title	MΑ
Name (Last, First, Middle, Title)	HOWARD ,ROBERT , ,
- OR -	
Entity Name to serve as Officer/Director	
Street Address	2155 W COLONIAL DRIVE
City, State	ORLANDO , FL
Zip Code & Country	32804
Title	T
Name (Last, First, Middle, Title)	HOWARD ,MELISSA , ,
- OR -	
Entity Name to serve as Officer/Director	
Street Address	4938 W COLONIAL DR #C
City, State	ORLANDO . FL
Zip Code & Country	32808
Title	
Name (Last, First, Middle, Title)	, , , ,

Division of Corporations			ALIACHMENŢ	https://efile.sunbiz.org/scripts/ubr001.exe
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(i .,	Title	•	block. # PO	99000099432

Officer/Director Signature MELISSA HOWARD

This signature must be that of the individual "signing" this document electronically or be made with the full knowledge and permission of the individual, otherwise it constitutes forgery under s.831.06, Florida Statutes. The individual "signing" this document affirms that the facts stated herein are true.

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