

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000101074

1. Entity Name

TOP NOTCH HAIR STUDIO, INC.

FILED
May 09, 2000 8:00 am
Secretary of State

05-09-2000 90138 041 ***150.00

Principal Place of Business

12995 CLEVELAND AVENUE
FORT MYERS FL 33907

Mailing Address

12995 CLEVELAND AVENUE
FORT MYERS FL 33907-3890

2. Principal Place of Business

12995 S. CLEVELAND AVE

Suite, Apt. #, etc.

SUITE 136

City & State

FORT MYERS, FL

Zip

33907

Country

LEE

3. Mailing Address

12995 S. CLEVELAND AVE

Suite, Apt. #, etc.

SUITE 136

City & State

FORT MYERS, FL

Zip

33907

Country

LEE



DO NOT WRITE IN THIS SPACE

4. FEI Number

65-6962894

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

SPIEGEL & UTRERA, P.A.
343 ALMERIA AVENUE
CORAL GABLES FL 33134

7. Name and Address of New Registered Agent

Name

RANDY ELDRIDGE

Street Address (P.O. Box Number is Not Acceptable)

12181 HAMPTON GREENS COURT

City

FT MYERS

FL

Zip Code

33913

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

Randy Eldridge RANDY ELDRIDGE - PRESIDENT

1/25/00

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PSD
SCHMUCKER, NANCY A
12995 CLEVELAND AVENUE
FORT MYERS FL 33907 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VTD
ELDRIDGE, RANDY C
12995 CLEVELAND AVENUE
FORT MYERS FL 33907 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
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
PRESIDENT
RANDY C. ELDRIDGE
12181 HAMPTON GREENS COURT
FT MYERS, FL 33913 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
SECRETARY
RANDY C. ELDRIDGE
12181 HAMPTON GREENS CT
FT MYERS, FL 33913 ☐ Change ☒ Addition

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

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

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:

Randy C. Eldridge RANDY C. ELDRIDGE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

PRESIDENT

Date 4/25/00 Daytime Phone #

941-768-7...