2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 01, 2002 8:00 am
Secretary of State
02-01-2002 90067 036 ***150.00

DOCUMENT # P99000101400

1. Entity Name
TIME OUT HAIR DESIGN, INC.

Principal Place of Business	Mailing Address
3491 62 AVE. NORTH PINELLAS PARK FL 33781	3491 62 AVE. NORTH PINELLAS PARK FL 33781

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
2146 9th Ave N	2146 9th Ave N
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: St Petersburg FL	City & State: St Petersburg FL
Zip: 33713 Country: USA	Zip: 33713 Country: USA

4. FEI Number 59-3612798 ☐ 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
SCIRICA, ANTHONY 3491 62 AVE. NORTH PINELLAS PARK FL 33781	Name Street Address (P.O. Box Number is Not Acceptable) 2146 9th Ave N City St Petersburg FL **FL** Zip Code 33713

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, 2002 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 NAME STREET ADDRESS CITY-ST-ZIP	V SCIRICA, CELIA 3491 62 AVE. NORTH PINELLAS PARK FL 33781	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	 2146 9th Ave N St. Petersburg FL 33713	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SCIRICA, ANTHONY 3491 62 AVE. NORTH PINELLAS PARK FL 33781	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	 2146 9th Ave N St Petersburg FL 33713	☒ Change ☐ Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	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: [illegible]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/01)