

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000106538

1. Entity Name
INTERNATIONAL STYLING TOOLS, INC.

Principal Place of Business
4668-4670 N. HATUS RD.
SUNRISE FL 33351

Mailing Address
P.O. BOX 451419
SUNRISE FL 33345

2. Principal Place of Business
Suite, Apt. #, etc.

3. Mailing Address
Suite, Apt. #, etc.

City & State

Zip Country

4. FEI Number 65-0967867

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

BRESLOW, RANAE
3100 N.W. 88TH AVENUE
UNIT 308
SUNRISE FL 33351

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 *Ranae Breslow / Michael Gilbert* DATE

Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

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

TITLE P
NAME GILBERT, MICHAEL
STREET ADDRESS 3100 NW 88TH AVE #308
CITY-ST-ZIP SUNRISE FL 33351

☐ Delete

TITLE T
NAME BRESLOW, RANAE
STREET ADDRESS 3100 NW 88TH AVE #308
CITY-ST-ZIP SUNRISE FL

☐ Delete

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CITY-ST-ZIP

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12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
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STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

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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: *Michael Gilbert*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED
Jan 09, 2002 8:00 am
Secretary of State

01-09-2002 90023 026 ***150.00



DO NOT WRITE IN THIS SPACE

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CR2E034 (9/01)

1/4/01 888-872-9997