

**2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # **W08988**

1. Entity Name

POPULAR HAIRDESIGNS, INC.



Principal Place of Business

Mailing Address

**10905 BISCAYNE BLVD
MIAMI, FLA 33161**

FILED

03 FEB -6 PM 2:24

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



☐ CHECK HERE IF MAKING CHANGES

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

65-0310169

Additional Fee
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

RAUL ROSADO

201 N.E. 47th St.

MIAMI, FLORIDA 33137

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. I am familiar with and accept the obligations of registered agent.

SIGNATURE **Raul Rosado**

Signature, typed or printed name of registered agent and title (if applicable)

(OFFICIAL: Individual Agent Signature (Required when Submitting))

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2003, Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS

TITLE **P/D**
NAME **RAUL ROSADO**
STREET ADDRESS **201 N.E. 47th St.**
CITY-ST-ZIP **MIAMI, FLORIDA 33137**

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

800012778728
02/19/03--01008--017 **300.00

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☐ Change ☐ Addition

2. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(b), 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 manager or trustee empowered to execute this report as required by Chapter 807, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an affidavit with an address, with all other persons empowered.

SIGNATURE: **K**

RAUL ROSADO
PRESIDENT

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR