

**2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N12000004986

**FILED**  
**Jan 15, 2020**  
**Secretary of State**  
**7907225133CC**

**Entity Name:** TOTAL BEAUTY INSTITUTE INC

**Current Principal Place of Business:**

5308 NORTH PEARL ST  
JACKSONVILLE, FL 32208

**Current Mailing Address:**

5308 NORTH PEARL ST  
JACKSONVILLE, FL 32208 US

**FEI Number:** 47-5100395

**Certificate of Status Desired:** Yes

**Name and Address of Current Registered Agent:**

BELL, TONIA  
5308 NORTH PEARL ST  
JACKSONVILLE, FL 32208 US

*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:** \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**Officer/Director Detail :**

Title            CEO  
Name            GAFFNEY, REGINALD  
Address        11636 JERRY ADAMS CT  
City-State-Zip: JACKSONVILLE FL 32218

Title            PD  
Name            BELL, TONIA  
Address        11636 JERRY ADAMS CT  
City-State-Zip: JACKSONVILLE FL 32218

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** TONIA D BELL

**DIRECTOR/PRESIDENT**

**01/15/2020**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date