

**2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P05000037096

**Entity Name:** THE MAD BARBERS, INC.

**Current Principal Place of Business:**

9421 S. ORANGE BLOSSOM TRAIL  
SUITE 11  
ORLANDO, FL 32837

**Current Mailing Address:**

9421 S. ORANGE BLOSSOM TRAIL  
SUITE 11  
ORLANDO, FL 32837 US

**FEI Number: 06-1638654**

**Certificate of Status Desired: No**

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

VELEZ, GUSTAVO A  
1641 CAPESTERRE DRIVE  
ORLANDO, FL 32824 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           | P                     | Title           | V                 |
| Name            | VELEZ, GUSTAVO A      | Name            | RAMIREZ, ROBERTO  |
| Address         | 1641 CAPESTERRE DRIVE | Address         | 560 CUDDLER AVE   |
| City-State-Zip: | ORLANDO FL 32824      | City-State-Zip: | COPIAGUE NY 11726 |

*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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE: GUSTAVO VELEZ**

**PRESIDENT**

**05/01/2014**

Electronic Signature of Signing Officer/Director Detail

Date