

2023 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P22000062743

Entity Name: PRIME HAIR SOLUTIONS CORP**Current Principal Place of Business:**4714 NW 165TH ST
MIAMI LAKES, FL 33014**Current Mailing Address:**4714 NW 165TH ST
MIAMI LAKES, FL 33014 US**FEI Number:** 88-3687617**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**MD MOHSIN, RAHMAN
3580 NE 15TH DR
HOMESTEAD, FL 33033 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
Name	MD MOHSIN, RAHMAN
Address	3580 NE 15TH DR
City-State-Zip:	HOMESTEAD FL 33033

Title	VP
Name	HOSSAIN, MD RAKIB
Address	812 SW 159TH DR
City-State-Zip:	PREMBROKE PINES FL 33027

Title	S
Name	MESA, IBIS C
Address	20404 SW 133RD AVE
City-State-Zip:	MIAMI FL 33177

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: MD MOHSIN , RAHMAN

P

04/26/2023

Electronic Signature of Signing Officer/Director Detail_____
Date