

**2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P99000050191

**Entity Name:** FLORIDA BARBER ACADEMY, INC.

**Current Principal Place of Business:**

3269 N FEDERAL HWY  
POMPANO BEACH, FL 33064

**Current Mailing Address:**

801 S DELAWARE HWY  
TAMPA, FL 33606

**FEI Number:** 65-0934877

**Certificate of Status Desired:** No

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

HAMILTON, STUART  
3269 N.FEDERAL HIGHWAY  
POMPANO BEACH, FL 33064 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	DPST	Title	V
Name	MARTIN, ALLAN S	Name	HAMILTON, STAURT
Address	801 S DELAWARE AVE	Address	501 E KENNEDY BLVD STE 801
City-State-Zip:	TAMPA FL 33606	City-State-Zip:	TAMPA FL 33602

*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:** HAMILTON , STAURT

**VICE PRESIDENT**

**03/28/2013**

Electronic Signature of Signing Officer/Director Detail

Date