

**2021 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F01000005590

**Entity Name:** FIRST CHOICE HAIRCUTTERS (INTERNATIONAL) CORP.

**FILED**  
**Apr 12, 2021**  
**Secretary of State**  
**5368831541CC**

**Current Principal Place of Business:**

3701 WAYZATA BOULEVARD, SUITE 500  
CORPORATE COMPLIANCE  
MINNEAPOLIS, MN 55416

**Current Mailing Address:**

3701 WAYZATA BOULEVARD, SUITE 500  
CORPORATE COMPLIANCE  
MINNEAPOLIS, MN 55416 US

**FEI Number:** 98-0171935

**Certificate of Status Desired:** No

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

NRAI SERVICES, INC  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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 DIRECTOR, PRESIDENT

Name ZUPFER, KERSTEN

Address 3701 WAYZATA BOULEVARD, SUITE  
500  
CORPORATE COMPLIANCE

City-State-Zip: MINNEAPOLIS MN 55416

Title SECR

Name RUSIN, AMANDA

Address 3701 WAYZATA BOULEVARD, SUITE  
500  
CORPORATE COMPLIANCE

City-State-Zip: MINNEAPOLIS MN 55416

Title TREASURER

Name MCSHANE, BIZ

Address 3701 WAYZATA BOULEVARD, SUITE  
500  
CORPORATE COMPLIANCE

City-State-Zip: MINNEAPOLIS MN 55416

*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:** AMANDA RUSIN

**SECRETARY**

**04/12/2021**

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

\_\_\_\_\_  
Date