SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996 AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.) **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State 1996 DIVISION OF CORPORATIONS DOCUMENT # (5) G18296 DURAN-RUBERO BEAUTY CENTER, INC. Principal Place of Business Mailing Address 2100 CORAL WAY 2100 CORAL WAY SUITE 100 SUITE 100 MIAM! FL MIAMI FL 3. Date Incorporated or Qualified 3a. Date of Last Report 12/30/1982 05/01/1995 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 59-2142512 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 28 Trust Fund Contribution Added to Fees Zip Country Country 8. This corporation has liability for intangible tax under s 199 032 Florida Statutes Yes X No 24 30 9. Name and Address of Current Registered Agent 10. Name and Address of Registered Agent DURAN, AMERICA DURAN, AMERICA 200 S.W. 100 PLACE Street Address (RO. Box Number is Not Acceptable) 973 N.W. 128 PLACE 82 see new address MIAMI FL: 10900-4528-83 84 Zip Code 3.3 182 11. Pursuant to the provisions of Sections 607 0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida, Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or pricted han e of registered agent and theid applicable (InDTE: Registered Agent signature required when remetating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (96/E)DELETE TITLE 1.3 TITLE PRESIDENT Change Addition PRESIDENT DURAN, AMERICA 913 N.W. 128 PLACE, MIAMI, FL. 33182 Change Addition NAME DURAN, AMERICA 1.2 NAME CR2E034 STREET ADDRESS 100 LINCOLN ROAD, SUITE 1535 1.3 STREET ADDRESS MIAMI BEACH FL CITY - ST - ZIP 14 CHTY - ST - ZIP TITLE DELETE 21 THILE DUGAS, WALACE NAME 2.2 NAME INALLACE DUGAS 13 N.W. 128 PLACE MIAMI, FL. 3318 100 LINCOLN ROAD, SUITE 1535 STREET ADORESS 2 3 STHEET ADDRESS 973 N.W. MIAMI BEACH FL CITY-ST-ZIP 2 4 CIFY - ST - 7IP TITLE DELETE Change Addition 3 I THILE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY - ST- 7IP TITLE DELETE 4.1 TITLE Change Addition NAME 4 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY - ST - ZIP 4.4 CITY - \$1 - ZIP TITLE DELETE 5.1 100.6 Change Addition NAME 5.2 NAM6 STREET ADDRESS 5.3 STREET ADDRESS CiTY-ST-ZIP 5.4 CITY - \$1 - ZIP TITLE DELETE 61 TABLE Change Addition NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 6.4 CITY - ST - 7IP 14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119 07(3)(k). Florida Statutes I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as it 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND THE OR PHINTED NAME OF SIGNING OFFICER OR DIRECTOR

7-29-96 (305)642-4004