

**FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00**

CORPORATION  
ANNUAL REPORT  
1995



FLORIDA DEPARTMENT OF STATE  
Tallahassee, Florida  
Secretary of State  
P.O. Box 12000, Tallahassee, FL 32304

DOCUMENT # **K31241** (8)  
LOOKS MODEL MANAGEMENT, INC.

APR 11 1995  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

1433 GULF TO BAY BLVD  
SUITE 1  
CLEARWATER FL 34615

3005 SR 590  
200  
CLEARWATER FL 34619  
US

3. Date Incorporated or Reinstated: **08/08/1988**  
3a. Date of Last Report: **05/01/1994**

21. Principal Office (City, State, Zip):  
**3005 S.R. 590**  
**CLEARWATER**  
**FLORIDA**  
**34619**

26. Mailing Address (City, State, Zip):  
**3021 S.R. 590 #436**  
**CLEARWATER**  
**FLORIDA**  
**34619**

4. FEI Number: **59-3007865**  
Approved For:  Not Applicable

5. Certificate of Status Desired:  **\$8.75 Additional Fee Required**

6. Election Campaign Financing:  **\$5.00 May Be Added to Fees**

8. This corporation has liability for intangible tax under 219.01, Florida Statutes:  Yes  No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**GUENTHER, HEIDI LEE**  
**3005 SR 590**  
**STE200**  
**CLEARWATER FL 34619**

B1 Name: **NANCY A. GUENTHER**  
B2 Street Address (P.O. Box Number is Not Acceptable): **3021 S.R. 590 #436**  
B3 City: **CLEARWATER** FL B5 Zip Code: **34619**

11. Pursuant to the provisions of sections 147.001, 147.002, and 147.003, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office and registered agent, or both, in the State of Florida. Such change was authorized by the corporation a board of directors. Changes accept this appointment as registered agent. I am

SIGNATURE: *Nancy A. Guenther* V.P. 4/26/95

12. OFFICERS AND DIRECTORS

13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS ONLY

|                |                             |
|----------------|-----------------------------|
| NAME           | <b>GUENTHER, HEIDI LEE</b>  |
| STREET ADDRESS | <b>2000 DEKLE AVE #3</b>    |
| CITY           | <b>TAMPA FL</b>             |
| NAME           | <b>VP NANCY A. GUENTHER</b> |
| STREET ADDRESS | <b>3021 S.R. 590 #436</b>   |
| CITY           | <b>CLEARWATER, FL 34619</b> |

|                |  |
|----------------|--|
| NAME           | <input type="checkbox"/> Change <input type="checkbox"/> Addition            |
| STREET ADDRESS | <input type="checkbox"/> Change <input type="checkbox"/> Addition            |
| CITY           | <input type="checkbox"/> Change <input type="checkbox"/> Addition            |
| NAME           | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| STREET ADDRESS | <input type="checkbox"/> Change <input type="checkbox"/> Addition            |
| CITY           | <input type="checkbox"/> Change <input type="checkbox"/> Addition            |

14. I, Secretary of State, certify that the information supplied with this filing is substantially furnished and that I am not liable for the corporation's failure to have been incorporated in Florida. I understand that the corporation shall have the burden of proving that the information supplied with this filing is substantially true and correct. I understand that the corporation shall have the burden of proving that the information supplied with this filing is substantially true and correct. I understand that the corporation shall have the burden of proving that the information supplied with this filing is substantially true and correct.

SIGNATURE: *Nancy A. Guenther*  
SIGNATURE AND TITLE OF REGISTERED OFFICER OR DIRECTOR

4-4-95 813-791-7100