

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

CORPORATION  
ANNUAL REPORT  
1995



FLORIDA DEPARTMENT OF STATE  
Sandra B. Matham  
Secretary of State  
DIVISION OF CORPORATIONS

APPROVED  
AND  
FILED

95 MAY -1 11 8:46

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # **P93000050407 (4)**

1. Corporation Name  
**CESARS BEAUTY, INC.**

Principal Place of Business  
**3203 NORTH STATE ROAD 7  
MARGATE FL 33063**

Mailing Address  
**3203 NORTH STATE ROAD 7  
MARGATE FL 33063**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified **07/12/1993** 3a. Date of Last Report **04/25/1994**

21. Principal Place of Business <b>2900 W Sample</b>	2a. Mailing Address <b>2900 W Sample</b>
22. Suite, Apt. #, etc. <b>Bay 440</b>	27. Suite, Apt. #, etc. <b>Bay 440</b>
23. City & State <b>Pompano Beach FL</b>	28. City & State <b>Pompano Beach FL</b>
24. Zip <b>33073</b>	29. Zip <b>33073</b>

4. FEI Number  
**65-0426518** Applied For  
 Not Applicable

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

6. Election Campaign Financing Trust Fund Contribution  **\$5.00 May Be Added to Fees**

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes  Yes  No

9. Name and Address of Current Registered Agent  
**ZEITLER, MARC  
3203 NORTH STATE ROAD 7  
MARGATE FL 33063**

10. Name and Address of New Registered Agent

81. Name	
82. Street Address (P.O. Box Number is Not Acceptable)	<b>2900 W Sample Rd</b>
83. City & State	<b>Bay 440</b>
84. City	<b>Pompano Beach FL</b>
85. Zip Code	<b>33073</b>

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. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: \_\_\_\_\_

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE	<b>PSTD</b>
2. NAME	<b>ZEITLER, MARC</b>
3. STREET ADDRESS	<b>3203 NORTH STATE ROAD 7</b>
4. CITY, ST. ZIP	<b>MARGATE FL 33063</b>
5. TITLE	
6. NAME	
7. STREET ADDRESS	
8. CITY, ST. ZIP	
9. TITLE	
10. NAME	
11. STREET ADDRESS	
12. CITY, ST. ZIP	
13. TITLE	
14. NAME	
15. STREET ADDRESS	
16. CITY, ST. ZIP	

11. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12. NAME	
13. STREET ADDRESS	<b>2900 W Sample Rd Bay 440</b>
14. CITY, ST. ZIP	<b>Pompano Beach, FL 33073</b>
15. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
16. NAME	
17. STREET ADDRESS	
18. CITY, ST. ZIP	
19. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
20. NAME	
21. STREET ADDRESS	
22. CITY, ST. ZIP	
23. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
24. NAME	
25. STREET ADDRESS	
26. CITY, ST. ZIP	

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 199.032, Florida Statutes. I further certify that the information indicated on this annual report or supplementary annual report is true and accurate and that my signature shall have the same legal effect as if made under oath. This is an official statement of this corporation or the person or persons empowered to execute the report as required by Chapter 127, Florida Statutes, and that my name appears in Block 1 of the report, or as an appointed agent with an acknowledgment.

SIGNATURE: *Marc Zeitler* **Mark Zeitler** 4/28/95 (305) 346-7288