FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998

FLORIDA DEPARTMENT OF STATE

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P94000070198 (4)

AA DISCOUNT BEAUTY SUPPLY, INC.

Principal Place of Business Mailing Address

FILED May 01 1998 8:00am Secretary of State



2421 LAKE MIRAMAR WAY MIRAMAR FL 33025			2421 LAKE MIRAMAR WAY MIRAMAR FL 33025					
						DO NOT WRITE IN	THIS SPACE	 -
						3. Date Incorporated or Qualified 09/22/1994		
2. Principal Pi	ace of Business	2a. Mailing A	2a. Mailing Address			4, FEI Number	A	oplied For
21		26	26			65-0520601	No.	ot Applicable
Suite, Apt.	#, etc.	Suite, Ap	Suite, Apt #, etc.			5. Certificate of Status Desired		Additional
22		27				a. Certificate of Status Desired	Fee Re	equired
City & State	•	City & Sta	City & State			6. Election Campaign Financing	\$5.00	May Be
23		28				Trust Fund Contribution	Added	to Fees
Zip	Country	Zip	, · — — ·			8. This corporation owes or has paid the current year Intangible		
24	25	[29]		10		Personal Property Tax due June 30.		J No
	9. Name and Address of Cu	rrent Registered Age	nt		т	10. Name and Address of New Regist	ered Agent	
	AJE, PETER			81	Name			ļ
247	21 LAKE MIRAMAR WAY			82	Street A	ddress (P.O. Box Number is Not Acceptable)		
MIRAMAR FL 33025					l			
ļ				83				
	•			84	City		85 Zip	Code
				۳	Only		FL " 2"	
11. Pursuant t	o the provisions of Sections 607	0502 and 607.1508, F	orida Statutes	, the abov	e-named c	orporation submits this statement for the purporation's board of directors. I hereby accept the	ose of changing it	s registered
office or re	egistered agent, or both, in the S m familiar with, and accept the o	itate of Florida. Such c bligations of Section 6	tange was au 07.0505. Flori	thorized by da Statute:	y the carpa s.	ration's board of directors. I hereby accept the	e appointment as	registered
agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.								
SIGNATURE	Signature, typed or printed name of registers	d agent and tale if applicable	(NOTE: I	Registered Age	ent signature re	quired when reinstating) D	ATE	<u> </u>
12.	OFFICERS	AND DIRECTORS		13.		ADDITIONS/CHANGES TO OFFICERS	AND DIRECTOR	RS IN 12
TITLE	_D		DELETE	1.1 TITLE	ļ		Change	Addition
NAME	anaje, peter			1.2 NAME];
STREET ADDRESS	2421 LAKE MIRAMAR WA	·Υ		1.3 STREET	ADDRESS			13
CITY-ST-ZIP	MIRAMAR FL 33025			1.4 CITY-S	T-ZIP			lä
TITLE	D		DELETE	2.1 TITLE			☐ Change	Addition (
NAME	anaje, annmarie			2.2 NAME				I
STREET ADDRESS	2421 LAKE MIRAMAR WA	·Υ		2.3 STREET	ADDRESS			
CITY-ST-ZIP	MIRAMAR FL 33025			2. 4 CITY -	ST-ZIP			
TITLE			DELETE	3.1 TITLE			☐ Change	☐ Addition
NAME				3.2 NAME	1			
STREET ADDRESS				33 STREET	ADDRESS			1
CITY-ST-ZIP				3.4. CITY-1				ł
TITLE			DELETE	4.1 TITLE			Change	Addition
NAME				4.2 NAME			•	
STREET ADDRESS				4.3 STREET	ADORESS			- 1
CITY-ST-ZIP				44 CITY-5				}
TITLE			DELETE	5.1 TITLE			Change	Addition
NAME				5.2 NAME	1		<u> </u>	
				5.3 STREET	Annocce			ļ
STREET ADDRESS				l	l l			
CITY-ST-ZIP TITLE		·····	DELETE	5.4 CITY - S 6.1 TITLE	or-ZIP		Change	Addition
		L-	DLLL16				L. Orange	- I rodition
NAME				6.2 NAME				
STREET ADDRESS				6.3 STREET	1			ļ
CITY-ST-ZIP		ad unidah dikim dilin — —d	ant muniting	6.4 CITY - S		in Continu 140 07/2Vi) Florida Chabita 11	or poetifical as as a	Information
15. Inereby C	eruny unan ine information supplic	ra with this filing does i	IOL QUALITY TOF	ине ехетр	tion stated	in Section 119.07(3)(i), Florida Statutes. I furth	ier ceriny mai the	mormation

indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: