SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997. AMOUNT DIE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

PROFIT CORPORATION **ANNUAL REPORT**

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS



Francisco (Constitution of Constitution of Con

97 AUG 12 PM 3: 5

| 1. Corporation | DOCUMEN # P95000090901 (6) | | | | | | SECRETARY OF STATE | | |
|------------------------------------|---|---|---|-----------------|--------------------------------|---------------------|--|--------|--|
| MELANIE'S UNISEX HAIR, INC. | | | | | | TALLAHASSEE FLORIDA | | | |
| 11100 | • • • • • • • | | | | | | I HABIITAK INA KANAFARKIR ABIK ABIKI BANKI KAN | 1 | |
| | | | | | | | | | |
| Principal Plac | | S | Mailing Address | | | | | 1 | |
| 5509 NW 7TH MIAMI FL 331 | | | 5509 NW 7TH AVE Miami Fl 33127 | | | | | | |
| MIAMI EL 301 | £1 | | MIAMI FE 30127 | | | | DO NOT WRITE IN THIS SPACE | | |
| | | | | | | | 3. Date Incorporated or Qualified 3a. Date of Last Report | | |
| 4 0/5/10 | (5) | | 2a. Mailing Address | | | | 11/28/1995 06/05/1996 4. FEI Number Contact # Applied Fo | | |
| 2. Principal P | lace of Busin | ness | 26. Mailing Address | | | | 4. FEI Number Correct Applied Fo. 65-0664391 U5-0670341 Not Applie | | |
| Sulte, Apt. | #. etc. | | Suite, Apt. #, etc. | | | | 60 7F | _ | |
| 22 | ., | | 27 | | | | 5. Certificate of Status Desired Fee Required | | |
| City & State | 6 | | City & State | | | | 6. Election Campaign Financing \$5.00 May Be | | |
| 23 | | | 28 | | | | Trust Fund Contribution Added to Fees | | |
| Zip | Country | | — — · — — — — — — — — — — — — — — — — — | | Country | | 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes You | - 1 | |
| 24 25 9, Name and Address of Curre | | | 29 30 30 10 10 10 10 10 10 10 10 10 10 10 10 10 | | | | 10. Name and Address of New Registered Agent | | |
| DA | VIS, MELAN | | | | 81 | Name | | | |
| | 75 N.W. 5 | | | | | Street Ad | Address (P.O. Box Number is Not Acceptable) | | |
| MIAMI FL 33168 | | | | | 82 83 | | | | |
| | | | | | | | | | |
| | | | | | | City | FL 85 Zip Code | | |
| 11 Purcuant | to the provis | sions of Sections 607.05 | in2 and 607 1508. Ft | orida Statutes | the above | e-named co | | here | |
| office or r | egistered ag | gent, or both, in the Stati ith, and accept the obli | e of Florida. Such ch | nange was aut | thorized by | the corpor | orporation submits this statement for the purpose of changing its register retion's board of directors. I hereby accept the appointment as register | bå | |
| SIGNATURE | in taliffical w | itir, and accept the oblig | galions of, occion o | OT.0000, FIOR | oa otatulos | | | | |
| SIGNATURE | Signature, typed | for printed name of registered as | | (NOTE: F | | nt signature red | quired when reinstating) DATE | | |
| 12. | <u> </u> | OFFICERS AT | ND DIRECTORS | DELETE | 13. | | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change | dition | |
| TITLE NAME | DAVIS, MELANIE | | · | | 1.1 TITLE 1.2 NAME | | C cualife C voi | Jidon | |
| STREET ADDRESS | AAATE NIME ETH BLACE | | | | 1.3 STREET | ADDRESS | | | |
| CITY-ST-ZIP | MINUTE ANDO | | | | 1.4 CITY-S | | 700002268957 | 7 | |
| TITLE | 1 | | | DELETE | 2.1 TITLE | | -08/15/970 !1!® -0 09 M | dition | |
| NAME | DAVIS, WILLIAM H | | 2.21 | | 2.2 NAME | | ****165.00 ****165.00 |) | |
| STREET ADDRESS | | | 2.3 \$ | | 2.3 STREET | ADDRESS | | | |
| CITY-ST-ZIP | | £ 33168 | | | | ST-ZIP | | 20 | |
| TITLE | S DELETE | | | ULLETE | 3.1 TITLE 3.2 NAME | | ☐ Change ☐ Ad- | מסוזוג | |
| NAME | JONES, KAREN J 710 N.W. 176 TERRANCE | | | | 3.2 NAME 3.3 STREET ADDRESS | | | | |
| BAIANAI EL ODORA | | | 3.4. C | | | | | | |
| CATY-ST-ZIP | | | | DELETE | 4.1 TITLE | | ☐ Change ☐ Ad | dition | |
| NAME | | | | | 4. 2 NAME | | | ļ | |
| STREET ADD/ESS | ł | | | 4.3 S | | ADDRESS | | | |
| CITY-STOP | | | | | 4.4 CITY-S | T-ZIP | | | |
| TITLE | □ DE | |] DELETE | 5.1 TITLE | | Change Adi | Silion | | |
| NAME | | | | | 5.2 NAME | | | 1 | |
| STREET ADDRESS | | | | | | ADDRESS | | | |
| CITY-ST-ZIP | | | Т | DELETE | 5.4 CITY-S 6.1 TITLE | 1-ZIP | ☐ Change ☐ Ad | dition | |
| NAME | | | | | 6.2 NAME | | | | |
| STREET ADDRESS | | | | | 6.3 STREET | ADDRESS | \sim | | |
| CITY-ST-ZIP | | | 6.4 Cf | | | | | | |
| | by costify the | at the information cuppli | ed with this films do | os not auglify: | for the eve | mption ctat | ded in Section 119 07/3V() Florida Statutes I further certify that the | | |

do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). 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 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.

(300)

Mear Florida deportment of State This is the first time of hore receive any bill partain to Henewing my corporation, it usually pay my billo on time al do not know wheather There we a mix up in the mail or wheat but al merer received the first renewal fee. Please except the 165,00! Whe reason my property tax has not been paid is because there is an decreprincy. I use to have a business at 5721 N.W. The avenue they sent me the properly told for that location alon no longer there my new address is 5509 N.W. Mm arenue of have told the people at the City of miami soveral of times they have seen papers, at here when the supposedly put me in the computer to have this strongetern but, at am willing to pay what ever I ame but al do not mont to pay where Il am ne longer located,