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Apr 03 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997



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

DOCUMENT # P96000005597 (5)

1. Corporation Name
SALON SYNERGY, INC.



Principal Place of Business: 1069 SIENA OAKS CIRCLE EAST, PALM BEACH GARDENS FL 33410
Mailing Address: 1069 SIENA OAKS CIRCLE EAST, PALM BEACH GARDENS FL 33410-5134

3. Date Incorporated or Qualified: 01/17/1996
3a. Date of Last Report

2. Principal Place of Business: 5600 PGA Boulevard
2a. Mailing Address: 5600 PGA Boulevard

4. FEI Number: 65-0632688
Applied For: Not Applicable

22. Suite, Apt. #, etc.: A 202
27. Suite, Apt. #, etc.: A 202

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

23. City & State: Palm Beach Gardens, FL
28. City & State: Palm Beach Gardens, FL

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

24. Zip: 33418, Country: USA
29. Zip: 33418, Country: USA

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

9. Name and Address of Current Registered Agent: BARKDULL, JAYNE R, 1400 CENTREPARK BLVD., SUITE 1400, WEST PALM BEACH FL 33401

10. Name and Address of New Registered Agent

81 Name: Elyse Meany
82 Street Address (P.O. Box Number is Not Acceptable): 1069 Siena Oaks Circle East
83
84 City: Palm Beach Gardens, FL 85 Zip Code: 33410

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: Elyse M Meany ELYSE N MEANY, PRESIDENT
Signature typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)
DATE: 3-31-97

Table with 4 columns: TITLE, NAME, STREET ADDRESS, CITY-ST-ZIP. Contains officer information for MEANY, ELYSE; GODFREY, JANET; BORINO, ANTHONY; FISHER, JEAN.

Table with 4 columns: TITLE, NAME, STREET ADDRESS, CITY-ST-ZIP. Contains officer information for ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.

14. I 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

SIGNATURE: Elyse M Meany ELYSE N MEANY PRESIDENT
Date: 3-18-97 Daytime Phone #: 561-691-6868

CR2E034 (9/96)