

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

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AND  
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98 JUN -4 PM 2:32

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

PROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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**DOCUMENT # P97000023130 (2)**  
 1. Corporation Name  
**NEW INSPIRATIONS BEAUTY SALON INC.**

Principal Place of Business <b>513 NORTH FEDERAL HIGHWAY BOYNTON BEACH FL 33435</b>	Mailing Address <b>513 NORTH FEDERAL HIGHWAY BOYNTON BEACH FL 33435</b>
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DO NOT WRITE IN THIS SPACE

<b>2.</b> Principal Place of Business	<b>2a.</b> Mailing Address
<b>21</b> Suite, Apt. #, etc.	<b>26</b> Suite, Apt. #, etc.
<b>22</b> City & State	<b>27</b> City & State
<b>23</b> Zip	<b>28</b> Zip
<b>24</b> Country	<b>29</b> Country
<b>25</b>	<b>30</b>

<b>3.</b> Date Incorporated or Qualified <b>03/10/1997</b>	
<b>4.</b> FEI Number <b>65-0729481</b>	Applied For <input type="checkbox"/> Not Applicable
<b>5.</b> Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75 Additional Fee Required</b>
<b>6.</b> Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	<b>\$5.00 May Be Added to Fees</b>
<b>8.</b> This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

**9. Name and Address of Current Registered Agent**

~~SIRISKA JOANNE  
8822 22ND AVE. N. SUITE 277  
ST. PETERSBURG FL 33710~~

**10. Name and Address of New Registered Agent**

<b>81</b> Name <b>EILEEN GREEN-HATCHER</b>
<b>82</b> Street Address (P.O. Box Number is Not Acceptable) <b>7148 GLENWOOD DRIVE</b>
<b>83</b>
<b>84</b> City <b>LANTANA</b>
<b>85</b> Zip Code <b>FL 33462</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: *Eileen Green-Hatcher* DATE: **1 June 98**

**12. OFFICERS AND DIRECTORS**

TITLE	<b>VICE-PRESIDENT / SECRETARY</b> <input type="checkbox"/> DELETE
NAME	<b>EILEEN GREEN-HATCHER</b>
STREET ADDRESS	<b>7148 GLENWOOD DRIVE</b>
CITY-ST-ZIP	<b>LANTANA FL 33462</b>
TITLE	<b>PRESIDENT / TREASURER</b> <input type="checkbox"/> DELETE
NAME	<b>FANNIE GREEN</b>
STREET ADDRESS	<b>4274 DE SNO STREET</b>
CITY-ST-ZIP	<b>Boynton Beach FL 33435</b>
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12**

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	<b>300002557609</b>
1.3 STREET ADDRESS	<b>-06/12/98--01004--001</b>
1.4 CITY-ST-ZIP	<b>***150.00 ***150.00</b>
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

**14.** I 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: *Eileen Green-Hatcher* DATE: **10/22/98**

CP2E034 (10/97)