SECOND NOTICE; CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998. AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #
1. Corporation Name

(1)

FOR MEN ONLY SALON, INC.

Principal Place of Business Mailing Address

**FILED** Jul 10 1998 8:00am Secretary of State

281 ROYAL POINCIAÑA WAY PALM BEACH FL 33480					281 ROYAL POINCIANA WAY PALM BEACH FL 33480													
		22.12.1.12							DO NOT WRITE IN THIS SPACE									
									3. Date Incorporated or Qualified							ľ		
2. Principal P	lana al Duni	T -	Maltina	A d droop					4. FÉI N	0/1992					14			
<del></del>	ace of busi	2a. Mailing Address								0367817	,			-	Applied	plicable		
Suite, Apt. #, etc,					Suite, Apt. #, etc.											\$8	75 Addit	
22					27						5. Certin	ficate of St	tatus Des	ired	Ш	7 -	ee Requir	
City & State					City & State						6. Elect	ion Cempa	sign Finar	ncina		\$5	.00 May	Re
23					28							Fund Con	_				Ided to Fe	
Zip	Country				Zip Cour				9 8. This corporation owe					or has paid the current year Intangible				
24	·	25		29	J				Personal Property Tax due June 30. Yes						No			
			Address of Current	Regi	stered A	gent					10. Nam	e and Add	dress of	New Re	gistered	Agent		
SACCO, <b>D</b> ENNIS C								81	Name	ı								
281 ROYAL POINCIANA WAY									82 Street Address (P.O. Box Number is Not Acceptable)									
PALM BEACH FL 33480																		
<b>≠</b> 1								83										
						84	City					4	FL	85	Zip Code	,		
11. Pursuant	to the provi	sions	of sections 607 0502	and F	07 1508	Florida Statute	as the	l	named	corpora	tion submit	ts this state	ement for	the pur		angino	its registe	red
office or	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	Signature, typed	or prin	ted name of registered agent	and litle	o if applicable	. (NC	OTE: Re	gistered A	igent signal	ture require	d when reinst	sting)			DATE			
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