## SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999. AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

**Katherine Harris** 

Secretary of State
DIVISION OF CORPORATIONS

## FILED Sep 17, 1999 8:00 am Secretary of State

09-17-1999 90005 037 \*\*\*550.00

# HORERO INIO: HOROX INIOS INION BININ ISCON NION GLORA CIUNA CIUNA CIUNA CIUNA GLORA CIUNA CIUNA CIUNA CIUNA C

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DOCUMENTAL Corporation Name	IT.	#	38357	1

PIERCING PAGODA OF FLORIDA, INC.

				•				
Principal Plac	e of Business			Mailing Address			-	
4770 BUSCAYN	ie blvd.			4770 BISCAYNE BL	.VD			
STE 830				STE 830				
MIAMI FL 3313	7			MIAMI FL 33137				DO NOT WRITE IN THIS SPACE
US				US				3. Date Incorporated or Qualified
L								06/04/1971
	Place of Busine	S\$		2a. Mailing Addre		سر د	-	4. FEI Number Applied For
21				26 P.O. E		<u>(200</u>	/	59-1352607 Not Applicable
Suite, Apt	. #, etc.			Suite, Apt. #,			ــــــــــــــــــــــــــــــــــــــ	5. Certificate of Status Desired \$8.75 Additional
22				27 3910-F	DLEF	K PLA	CE_	Fee Required
City & Sta	ite			City & State			0	6. Election Campaign Financing \$5.00 May Be
23				28 LEHIGH	<u> 1 1/1/11</u>		<u> </u>	Trust Fund Contribution
Zíp	Ĺ	Country		Zip		Country		8. This corporation owes the current year
24	2:	<del></del>		29 <i>/8002</i>	30	u	S	Intangible Personal Property. Yes No
	9. Name a	nd Address	of Current R	Registered Agent				10. Name and Address of New Registered Agent
DI DI	O DIOLIADO					81	Name	
l	S, RICHARD					82	Street	Address (P.O. Box Number is Not Acceptable)
	BISCAYNE I	SLVU						
STE.						83		<del></del>
MAIM	AI FL 33137					84	City	85 Zip Code
				-		04	City	FL 163 Zip Code
11. Pursuan	t to the provisio	ns of section:	s 607.0502 a	nd 607.1508, Florida	Statutes, t	he above-	named o	corporation submits this statement for the purpose of changing its registered
office or	registered ager	nt, or both, in	the State of	Florida. Such chang ons of, section 607.0	je was auth	orized by	the corp	oration's board of directors. I hereby accept the appointment as registered
		i, and accept	tile ooligatio	#15 OI, SECUOII OUT.U	303, i <b>io</b> na	a Otatules	•	
SIGNATURE	Signature, typed or	printed name of re	gistered agent an	d title if applicable.	(NOTE:	Registered A	gent signatu	re required when reinstating) DATE
12.		OFFI	CERS AND	DIRECTORS		13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	PTD			<b>X</b> DEI	.ETE	1.1 TITLE		PD Change Addition
NAME	RUSS, RICH	IARD P		~		1.2 NAME		RICHARD H. PENSKE
STREET ADDRESS	4770 BISCA	YNE BLVD.	STE 830			1.3 STREET	ADDRESS	3910 ADLER PLACE
CITY-ST-ZIP	MIAMI FL 33	3137				1.4 CITY-ST	-ZIP	BETHLEHEM, PA 18017
TITLE	VSD		·	<b>∑</b> DEI	FTF	2.1 TITLE		V3D X Change Addition
NAME	RUSS, GINA	l S				2.2 NAME		EUREVECKO JOHN F.
STREET ADDRESS	4770 BISCA		STF 830			2.3 STREET	ADDRESS	3910 ADLER PLACE
CITY-ST-ZIP	MIAMI FL-3					2.4 CITY-ST		BETHLEHEM, PA 18017
TITLE	D			DEI	ETE	3.1 TITLE		D Change X Addition
NAME	RUSS, DEN	IS A		L <b>CZ</b> DCI	, <u>.</u>	3.2 NAME		ALAN HOEFER
STREET ADDRESS	4770 BISCA		STF. 803			3.3 STREET	ADDRESS	30 ASTER AVE.
CITY-ST-ZIP	MIAMI FL 3		01L. 000			3.4 CITY-ST		HILLSBOROLIGH, CA94010
TITLE	1111/11111 1 E O	<i>,</i> (0)		Пові	ETE	4.1 TITLE	-211	D Change Addition
NAME						4.2 NAME		MARK RANDOL
							ADDDESS	2742 BELVOIR BLUD
STREET ADDRESS							ADDRESS	SHAKER HEIGHTS, OH 44122
CITY-ST-ZIP						4.4 CITY-ST- 5.1 TITLE	ZIP	OTHER TOTAL
TITLE				L DEL	.ETE			Change Addition
NAME	}					5.2 NAME	40DD555	
STREET ADDRESS				,		5.3 STREET		
CITY-ST-ZiP						5.4 CITY-ST-	ZIP	
TITLE				L_J DEL	ETE	6.1 TITLE		Change Addition
NAME 🚓						6.2 NAME		
STREET ADDRESS	]					6.3 STREET	ADDRESS	
CITY-ST-ZIP	L					6.4 CITY-ST-	ZIP	

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: JOHN FS QURRYECKO

Alaka

(610) 691-0437

CR2E034 (5/99)