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

PROFIT CORPORATION **ANNUAL REPORT**

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # 471444 (0)

RUSS & BOB'S BODY SHOP, INC.

FILED	
Apr 29 1998 8:00an	1
Secretary of State	



Principal Plac	ce of Business	Mailing Address			- 196444 AIA14 19621 (1914 61614 61611 6191 6191 6191	(PE) GLG[] G[]]	Elett biett 1881
2218 N. DIXI		2218 N. DIXIE HIGHWA					
HOLLYWOOD FL 33020 HOLLYWOOD FL 33020					DO NOT WRITE IN THIS SPACE		
					3. Date Incorporated or Qualified		
					03/24/1975		
	Place of Business	2a. Mailing Address	-		4. FEI Number		Applied For
21		26			59-1589436		Not Applicable
Suite, Apt.	. #, etc.	Suite, Apt #, etc.			5. Certificate of Status Desired		5 Additional
22 City 8 Can		City & State	_				Required
City & Stat	10	28			6. Election Campaign Financing Trust Fund Contribution		May Be
Zip	Country	Zip	Cou	ntrv	B. This corporation owes or has paid the corporation of the corpo		
24	25	29	30	•	Personal Property Tax due June 30.	Yes	□ No
	9. Name and Address of Curre				10. Name and Address of New Registers		
CF	RADDOCK, RUSSELL H			61 Name			
	7 SE 7 ST		-	82 Street Ad	dress (P.O. Box Number is Not Acceptable)		
D/	ANIA FL 33004				and the second s		
				83			
			ŀ	84 City		85 Zi	p Code
				1 ′	F	LII	
11. Pursuant	to the provisions of Sections 607.05	02 and 607.1508, Florida Status of Florida, Such change was	ites, the ab	ove-named co	rporation submits this statement for the purpose ation's board of directors. I hereby accept the a	of changing	its registered
agent. I a	am familiar with, and accept the oblig	galions of Section 607.0505, F	Iorida Stal	utes.	ation's board of directors. I hereby accept the a	PPORTITION	as registered
SIGNATURE							
40	Signature, typed or printed name of registered ag	umi and tale if applicative (NO ND DIRECTORS	<u>-</u>	Agent signature req	uired when reinstating) DATE	ND DIDECT	ODS IN 10
12.	OFFICERS AI	DELETE DELETE	13. 1.1 Til	ıf	ADDITIONS/CHANGES TO OFFICERS A		
NAME	CRADDOCK, PATRICIA A	C. Dettile	1.2 NA			Oriang	- Facility
STREET ADDRESS	357 SE 7 ST			REET ADDRESS			ł
CITY-ST-ZIP	DANIA, FL 00000			Y-ST-ZIP			Ì
TITLE	PD	DELETE	2.1 TIT			Chang	e Addition
NAME	CRADDOCK, RUSSELL H		2.2 NA				
STREET ADDRESS	357 SE 7 ST			REET ADDRESS			ł
CITY-ST-ZIP	DANIA, FL 00000			TY-ST-ZIP			ĺ
TITLE	· · · · · · · · · · · · · · · · · · ·	DELETE	3.1 717		4, 2, 2, 4, 4, 4, 4, 4, 4, 4, 4, 4, 4, 4, 4, 4,	Chang	e Addition
NAME			3.2 NA	ME			ŀ
STREET ADDRESS			3.3 ST	REET ADDRESS			j
CITY-ST-ZIP			3.4. CI	TY-ST-ZIP			
TITLE		DELETE	4.1 TiT	LE		Chang	e 🔲 Addition
NAME			4.2 N/	ME			
STREET ADDRESS			4.3 ST	REET ADDRESS			j
CITY-ST-ZIP			4.4 CIT	Y-ST-ZIP			
TITLE		DELETE	5.1 TiT	LE		☐ Chang	e 🔲 Addition
NAME			5.2 NA	ME			
STREET ADDRESS			5.3 ST	REET ADDRESS			}
CITY-ST-ZIP				Y-ST-ZIP			T-1 12 12 12 12 12 12 12 12 12 12 12 12 12
TITLE		☐ DELETE	6.1 717			L Chang	e 🛄 Addition
NAME			6.2 NA	1			ł
STREET ADDRESS]			REE1 ADDRESS			•
CITY-ST-ZIP	1		6.4 CIT	Y-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 logal 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 DULL DE VICALIA RUCSELL H CDA SDACK 4-22-90 (954) 922-4653