FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

537108 DOCUMENT #
1. Corporation Name

(3)

DARLENE'S HAIRSTYLING, INC.

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Suite, Apt. #, etc. 27 City & State City	Principal Place of Business Mailing A			iling Address	Address				1			
2. Principal Place of Business 2a. Mailing Address 59-1846729 Not Application 26 Solid Med 729 Not Applicable 184 Not App				2728 ANNETTE CIRCLE JACKSONVILLE FL 32216			3. Date Incorporated or Qualified					
Suite, Apt. ii. etc.				00					06/14/1977	0	4/19/1	1995
SURE April #, etc. SURE April #, etc. SURE Apr	2. Principal Plac	e of Business	2a.	Mailing Address								Applied For
City & State	21		26						59-1848729			
Added to Fees Zip Country Zip Country 8. This cooperation has beliefly extrategable by under s 190.032. Florids Statutes 190.032. Florids 190.032	Suite, Apt. #,	etc.		Suite, Apt. #, etc.					5. Certificate of Status Desired			
28	City & State		—	City & State					1			
Section Continue	Z _I p 24	 1	<u> </u>	Zip	\rightarrow	Country	/				under s	199.032,
EATON, DARLENE H. 3113 BEACH BOULEVARD JACKSONVILLE FL 32207 44 Orly FL 45 Orly FL 46 Orly FL 47 Orly FL 48 Orly			t Regist	ered Agent					10. Name and Address of New Re	gistered A	gent	
3113 BEACH BOULEVARD JACKSONNILE FL 32207 84						81		Name				
STATE ADDRESS 1.					82		Street Addre	ess (P.O. Box Number is Not Acceptable				
1. 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 difference 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 furnillar within, and accept the obligations of, Section 607,0505, Florida Statutes. SIGNATURE Signature type of printed name of registerial signature at thirs it special. 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 14. Third PD						83						
11. Paysamt to the provisions of Section 607.0502 and 607.1506. Florida Statutes, the above-harred corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Foricia. Such rating was without any location of directions. I hereby accept the appointment as registered agent. I am an accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature Point Point						84	-	City		FL	85 Z	ıp Code
12.	or registered familiar with SIGNATURE	d agent, or both, in the State of Floric , and accept the obligations of, Secti	da. Such ion 607.0	change was authorize 0505, Florida Statutes.	ed by th	ne corp		ration's board	d of directors. I hereby accept the appo	intment as r	egistere	d agent. I am
Title							nt s	signature required			DIRECTI	DES IN 12
NAME	· · · · · · · · · · · · · · · · · · ·		DIREC		_				ADDITIONS/CHANGES TO OFFI	<u></u>		
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	CITY-ST-ZIP	cortify that the information curreling	with this	filing is voluntarily furni	ished a	i.4 CITY - ind do	ST- AS	not qualify fo	or the exemption stated in Section 119	07(3)(k). Flor	ida Stati	ites. 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: SIGNATURE AND TYPED OR PRINTED NAME OF SIGN

Darlene H. EATON 4/22/96 (904) 224-3895