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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

(6)

TAYLOR'S TATTOOING, INC.

Principal Place of Business Mailing Address

FILED May 04 1998 8:00am Secretary of State



| 1929 S. FEDERAL HWY. FT LAUDERDALE FL 33316 | | | | 1929 S. FEDERAL HWY. FT LAUDERDALE FL 33316 | | | | | | | | DO NOT V | VRITE | IN THIS S | PACE | <u> </u> | | | |
|--|-------------------------------------|------------------|--------------|--|---------------------|--------------|-----------|-------------------|--------------------|---------|--------------------------|----------|------------------------------|---|-------|-------------------------------|---------------|----------------------|------------------|
| | | | | | | | | | | | | 3. | | Date Incorporated or Quali 08/15/1980 | fied | | | | |
| 2. Principal Place of Business 21 | | | | 2a. Mailing Address 26 | | | | | | 4. | 4. FEI Number 59-2096729 | | | | | Applied For Not Applicable | | | |
| 22 | Sulte, Apt. #, etc. | | | | Suite, Apt. #, etc. | | | | | | 5. | . C | Certificate of Status Desire | ď | | | | Additional quired | |
| 23 | City & State | | | | | City & State | | | | | | 6. | | Election Campaign Financi Trust Fund Contribution | ng | | | | May Be o Fees |
| 24 | Zip | Country 25 | | | | 29 30 | | | ountry | | | | Р | This corporation owes or h Personal Property Tax due | June | 30. | Yes | | angible] No |
| 9. Name and Address of Current Registered Agent | | | | | | | | | | | · | 10. | <u>. h</u> | Name and Address of Ne | w Re | gistered / | lga nt | | |
| TAYLOR, MYLES | | | | | | | | | 81 Name | | | | | | | | | | - |
| 1929 \$ FEDERAL HWY FT LAUDE RDALE FL | | | | | | | | | | Sti | eet Add | ress (F | P.C | O. Box Number is Not Acc | eptab | le) | | | |
| | | | | | | | | | В3 | | | | | | | | | | |
| | | | | | | | | j | 84 | Cit | у | | | | | FL | 85 | Zip (| Code |
| 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 | | | | | | | | | | | | | | s registered registered | | | | | |
| SIC | GNATURE _ | | | | | | | | | | | | | | | | | | |
| 12 | | Signature, typed | | of registered agreet FF1CERS AND | | | (NOTE | Registered | 1 Age | nt sig | alure requ | | | einstating) DDITIONS/CHANGES TO (| DEELO | DATE EDC AND | DIDE | CTOB | C INI 12 |
| TIT | | PD | | THE INSTANT | CHALL | | DELETE | 1.170 | TH F | | 一 | | <u> </u> | DDITIONS/CHANGES TO | 01110 | LIIO AND | | | Addition |
| NA | | | R, MYLES | | | _ | , 0.2.2.2 | 1.2 NA | | | | | | | | | | | |
| | STREET ADDRESS 1929 S. FEDERAL HWY. | | | | | | | | 1.3 STREET ADDRESS | | | | | | | | | | ; |
| _ | TY-ST-ZIP FT LAUDERDALE, FL 00000 3 | | | | | 3316 | | | 1.4 CITY-ST-ZIP | | | | | | | | | | İ |
| TITL | | VST | | | | | DELETE | 2.1 TI | | - | | | | | | | CI | nange | Addition |
| NAJ | ME | TAYLOR | R, MYLES | | | | | 2.2 NA | ME | | | | | | | | | | |
| STR | EET ADDRESS | 1929 S. | FEDERAL | . HWY. | | | | 2.3 \$1 | REET. | ADDR | ESS | | | | | | | | |
| CIT | Y-ST-ZIP | FT LAUI | DERDALE | FL 33316 | | | | 2. 4 C | ITY-S | T-ZIF | | | | | | | | | |
| TITE | E I | | | | | | DELETE | 3.1 T/3 | ĹĔ | | | | | | | | | nange | Addition |
| NAI | AE | | | | | | | 3.2 N/ | ME | | | | | | | | | | |
| ŞTR | EET ADDRESS | | | | | | | 3.3 ST | REET. | ADDR | ESS | | | | | | | | |
| | Y-ST-ZIP | | | | | | | 3.4. C | | T-ZIP | | | | · | | | | | |
| TITL | \ \ \ | | | | | L. | DELETE | 4.1 T/3 | | | - | | | | | | ЩО | nange | Addition |
| NAI | _ | | | | | | | 4. 2 N | | | | | | | | | - | | ļ |
| | REET ADDRESS | | | | | | | 4.3 \$1 | | | ESS | | | | | | | | |
| _ | Y-ST-ZIP | | | | | | DELETE | 4.4 Ci | | T - ZIP | | | | | | | | nanna | Addition |
| TITI | 1 | | | | | _ | I DECETE | 5.1 Til 5.2 N/ | | | | | | | | | u | en iAe | _ Addition |
| NA) | HEET ADDRESS | | | | | | | 5.2 N/ 5.3 ST | | ልበቡል | 166 | | | • | | | | | |
| | Y-ST-ZIP | | | | | | | 5 4 Ci | | | 133 | | | | | | | | |
| TITI | | | | | | | DELÉTE | 6.1 10 | | 1-4H | | | _ | | | | ☐ ci | nange | Addition |
| NAI | | | | | | _ | | 6.2 NA | | | | | | | | | | ~ | _ |
| | REET ADDRESS | | | | | | | 6.3 \$1 | | ADDR | ess | | | | | | | |) |
| | Y-ST-ZIP | | | | | | | 6.4 CI | | | | | | | | | | | |

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 697. Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.