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**PROFIT** CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

M & G BEAUTY SALON, INC. Principal Place of Business Mailing Address % MARIA J SMITH % MARIA J SMITH 12155 BISCAYNE BLVD. 12155 BISCAYNE BLVD. MIAMI FL 33181 MIAMI FL 33181-2746 3. Date Incorporated or Qualified 3a. Date of Last Report 01/15/1981 05/01/1996 2. Principa' Place of Business 4. FEI Number 2a. Mailing Address Applied For 59-2497549 26 Not Applicable 21 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 Trust Fund Contribution Added to Fees 28 Zip Country Country Zip 8. This corporation has liability for intangible tax under s. 199.032, Yes No Florida Statutes 24 29 30 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name SMITH, MARIA J 12155 BISCAYNE BLVD. Street Address (P.O. Box Number is Not Acceptable) MIAMI FL 83 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. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. Change Addition DELETE TITLE PD 111116 NAME SMITH, MARIA J 1.2 NAME 12155 BISCAYNE BLVD. 1.3 STREET ADDRESS STREET ADDRESS MIAMI FL 1.4 CITY-ST-ZIP CITY - ST - ZIF DELETE Change Addition SD 2.1 TITLE TITLE SMITH, ALFREDO 22 NAME NAME 12155 BISCAYNE BLVD. STREET ADDRESS 23 STREET ADDRESS MIAMI FL 2 4 CITY-ST-ZIP CITY - ST - 7/2 Addition DELETE 3.1 TITLE Change THILE SMITH, ALFREDO 3.2 NAME NAME 12155 BISCAYNE BLVD. 3.3 STREET ADDRESS STREET ADDRESS MIAMI FL 3.4. CITY-ST-ZIP CI1Y-S1-2IP DELETE Change Addition TITLE 4.1 TITLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition 5.1 TITLE TITLE 5.2 NAME NAMÉ STREET ADDRESS 53 STREET ADDRESS CHTY-ST-ZIP 54 CITY-ST-ZIP [ Change DELETE 6.1 TITLE Addition THLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CITY-ST-ZIP CITY - ST - ZIP 14. I do 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.

naria smith

FILED Feb 18 1997 8:00am Secretary of State