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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # F32655

PIZZAZZ HAIR DESIGN, INC.

I the state		·	<u> </u>				
Principal Place	of Business	Mailing Address		,			
771 VILLAGE BI	LVD.	771 VILLAGE BLVD.				·	•
SUITE 208		SUITE 208			mitte NI THIO ODACE		
WEST PALM BEACH FL 33409		WEST PALM BEACH FL 33409			RITE IN THIS SPACE		
US		US			 Date Incorporated or Qualif 04/29/1981 		٠
2. Principal Pl	ace of Business	2a. Mailing Address			4, FEI Number	Apr	olied For
21		26			59-2285660		Applicable
Suite, Apt.	#, etc.`	Suite, Apt. #, etc.	•		5. Certificate of Status Desired	\$8.75 ∧	I
22	فتنا والمعروف أأريها لياك ويتبيه يؤوينكيك	27		بالمحموسية	5. Certificate of Status Desired	Fee Re	quired:
City & State	e	City & State	-		6. Election Campaign Financia	ng _ \$5.00	May Be
23		28			Trust Fund Contribution	Added to	Fees
Zip	Country	Zip	Country		8. This corporation owes the o	current year Intangible	
	25	├ - ¬ ` ┌	30		Personal Property Tax.		□No
24	9. Name and Address of Current		, , , , , , , , , , , , , , , , , , ,		10. Name and Address of Ne	w Registered Agent	
	g. Italia alia Addiesa di outron	Trogistator - Igo	81	Name	•		
. CIKL	IN, ALAN J;						
	N FLAGLER DRIVE		82	Street Addr	ress (P.O. Box Number is Not Acce		-
	ITHBRIDGE CTR., 19TH FL.		83		্ত্রেটারের ব্যবস্থা হৈ ক্রেন্ড শ্রেটারের বিজ্ঞান প্রত্যু ব্যৱস্থান করে ব্যবস্থা বিজ্ঞান বিজ্ঞান	a (daga direkter) (daga berakan berakan direkter) daga berakan direkter direkter direkter direkter direkter di	31 6101 1981
	ALM BEACH FL 33401		63		1隻競攝影響		
)	NEW DEACH TE SON!		84	City		FL 85 Zip C	ode
44 (0)	to the provisions of Sections 607.0502	and 607 1509. Florida Statutos		nomed sees	poration submits this statement for	the purpose of changing its	registered
11. Puisuain	to the brokisions of Sections on 19905	and bur 1506, Florida Statutes	s, the above	Filamed corp	board of dispetors. I boroby of	cent the appointment as rec	nistered
office or n	to the provisions of sections of years of egistered agent, or both, in the State of m familiar with, and accept the obligati Signature, typed or printed name of registered agent	of Florida: Such change was autions of, Section 607.0505, Florida	thorized by da Statutes.	the corporatio	on's board of directors. Thereby at	DATE DATE	
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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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

STREET ADDRESS

FILED

Feb 03, 1999 8:00am

Secretary of State

02-03-1999 90007 020 ***150.00