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**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## FILED Apr 20, 1999 8:00 am Secretary of State 04-20-1999 90165 020 \*\*\*150.00

## DOCUMENT # F39634 1. Corporation Name

THE HEADLINER EXPRESSIONS OF HAIR, INC.

Principal Place	of Business	Mailing Address					( 1001104 1108 11110 10110 01100 11111 11111		., ., .,	
% HARL HUGHES 1503 E COMMERCIAL BLVD.		% HARL HUGHES 1503 E COMMERCIAL BLVD.					DO NOT WRITE II	N THIS SPACE		
FT LAUDERDALI	E FL 33334-5717	FT LAUDERDALE FL 33334-	5/1/			3.	Date Incorporated or Qualifed	THIS OF TOL		]
							06/05/1981			1
2. Principal Pl	ace of Business	2a. Mailing Address				4.	FEI Number	1——	Applied For	ļ
21		26					59-2087334		Not Applicable	-
Suite, Apt. #, etc.		Suite, Apt. #, etc.				5.	Certificate of Status Desired	, .	Additional Required	
City & State	e	City & State				6.	Election Campaign Financing	\$5.0	May Be	7
23	<b>,</b> -	28					Trust Fund Contribution	Adde	d to Fees	]
Zip	Country	Zip	Cou	intry	<u>.                                      </u>	8.	This corporation owes the current y		_	ļ
24	25	29	30				Personal Property Tax.	X Yes	No	4
	9. Name and Address of Current	Registered Agent				10.	Name and Address of New Regis	stered Agent		4
	UEO MADI			81  N	Name		-			
	HES, HARL E COMMERCIAL BLVD.			<b>82</b> S	Street Addre	ess (P	O. Box Number is Not Acceptable)	<u> </u>		
FT L	AUDERDALE FL 33308			83					•.	]
				84 C	City		<u>, , , , , , , , , , , , , , , , , ,</u>	85 Zi	p Code	1
	to the provisions of Sections 607.0502			11	-			FL	·	4
agent. I a	to the provisions of Sections 607.0502 egistered agent, or both, in the State of m familiar with, and accept the obligat	ions of, Section 607.0505, Flo	nda Stat	utes.			1,	1/11/1/12	1.	1
SIGNATURE	Signature typed or printed name of registared agent		Registered	_	mature required			DATE	7777	<u>8</u>
SIGNATURE	OFFICERS'ANI	DIRECTORS	Registered	Agent sig	mature required		einstating)  ADDITIONS/CHANGES TO OFFICE			11/98)
SIGNATURE	DP OFFICERS AND		13.	Agent sig	grature required			DATECHARGE		4 (11/98)
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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.

SIGNATURE: