FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT **1995**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 MAR 27 AM 11:22

DOCUMENT # **F41112** **(6)**

1. Corporation Name
STYLES & STUFF, INC.

Principal Place of Business	Mailing Address
5748 54TH AVENUE, NORTH ST. PETERSBURG FL 33709	5748 54TH AVENUE, NORTH ST. PETERSBURG FL 33709

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: 08/12/1981
3a. Date of Last Report: 05/01/1994

2. Principal Place of Business	2a. Mailing Address
21 5742 - 54th Avenue North	26 5742 - 54th Avenue North
Suite, Apt. #, etc. 22 St. Petersburg, Florida	Suite, Apt. #, etc. 27 St. Petersburg, Florida
City & State 23	City & State 28 3
Zip 24 33709 Country 25	Zip 29 33709 Country 30

4. FEI Number: 59-2132796 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

GIGLIA, TRISH L.
5748 54TH AVENUE, NORTH
ST. PETERSBURG 33709

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable) 5742 - 54th Avenue North
83
84 City St. Petersburg FL 85 Zip Code 33709

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 Trish L. Giglia 3/21/95
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DST	11 TITLE	☒ Change ☐ Addition
NAME	GIGLIA, TRISH L	12 NAME	
STREET ADDRESS	5748 54TH AVENUE N.	13 STREET ADDRESS	5742 - 54th Avenue North
CITY-ST-ZIP	ST PETERSBURG, FL 00000	14 CITY-ST-ZIP	St. Petersburg, Florida 33709
TITLE	PD	21 TITLE	☒ Change ☐ Addition
NAME	GIGLIA, PHILIP	22 NAME	
STREET ADDRESS	5748 54TH AVENUE N.	23 STREET ADDRESS	5742 - 54th Avenue North
CITY ST ZIP	ST PETERSBURG, FL 00000	24 CITY-ST-ZIP	St. Petersburg, Florida 33709
TITLE		31 TITLE	☐ Change ☐ Addition
NAME		32 NAME	
STREET ADDRESS		33 STREET ADDRESS	
CITY ST ZIP		34 CITY-ST-ZIP	
TITLE		41 TITLE	☐ Change ☐ Addition
NAME		42 NAME	
STREET ADDRESS		43 STREET ADDRESS	
CITY ST ZIP		44 CITY-ST-ZIP	
TITLE		51 TITLE	☐ Change ☐ Addition
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	
CITY ST ZIP		54 CITY-ST-ZIP	
TITLE		61 TITLE	☐ Change ☐ Addition
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY ST ZIP		64 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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.

SIGNATURE: Patricia (Trish) L. Giglia 3/21/95 (813) 345-1655
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0300767 CP