ANNL	PROFIT RPORATION JAL REPORT 1996	Sandra Secre	ARTMENT OF STATE a B Mortham stary of State F CORPORATIONS		
1. Corporatio		84 (3)			
DAIST	NAILS & LASHES, INC.			h ka akkan dian adina khadi dalah radi.	ANAN ANAN ANAN ANAN ANAN ANAN ANAN
Principal Place	e of Business	Mailing Address			
	andale Beach Blyd. E Fl 33009-1421	615 E HALLANDALE (HALLANDALE FL 3300			
				3. Date Incorporated or Qualified 11/02/1981	3a. Date of Last Report 02/07/1995
2. Principal Pl	ace of Business	2a. Mailing Address		4. FE: Number	Applied For
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		59-2162102 5. Certificate of Status Desired	Not Applicable \$8.75 Additional
City & State	}	City & State		Certificate of status besired Election Campaign Financing	Fee Required \$5.00 May Be
Zip	Country	28 Zip	Country	Trust Fund Contribution	Added to Fees
24	25 9. Name and Address of Curre	29	30	8. This corporation has liability for Florida Statutes	Yes X No
P.		ent Registered Agent	81 Name	10. Name and Address of New Re	egistered Agent
PATINO, DAISY 33512 IVES DAIRY ROAD			82 Street Add	dress (P.O. Box Number is Not Acceptal	ole)
NO	ORTH MIAMI BEACH FL 33179	•	83		
			84 City		
			OH City		
11. Pursuant t	o the provisions of Sections 607.05	02 and 607 1508, Florida Statu	1 1 7	poration submits this statement for the p	FL 85 Zip Code
	o the provisions of Sections 607.05 agistered agent, or both, in the Stat or familiar with, and accept the oblig	n02 and 607.1508, Florida Statu e of Florida Such change was gatrons of, Section 607.0505, Fl	iles, the above-named corp	poration submits this statement for the p tion's board of directors. I hereby accep	
SIGNATURE	Signature, typed or printed name of registered as	gent and title if applicable (NC	les, the above-named corp authorized by the corporal lorida Statutes	umd when roinstainig)	LIPOSE of changing its registered the appointment as registered
SIGNATURE	Signature, typed or printed name of registered as	garana ar, accitan d ay ,0303, 11	les, the above-named corp authorized by the corporal lorida Statutes		PL urpose of changing its registered the appointment as registered
SIGNATURE 12. IIILE NAME	Signature, typed or printed name of registered as OFFICERS AI PSD PATINO, DAISY	gent and title if applicable (NC NO DIRECTORS	lies, the above-named corrauthorized by the corporal lorida Statutes IIE Bi-gistered Agent signature requirements 13. 11 TITLE 12 NAME	umd when roinstainig)	PL urpose of changing its registered the appointment as registered
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