

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

DOCUMENT # F69842 (5)

1. Corporation Name

SALON 41, INC.

FILED
95 JAN 25 PM 12:59
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business
142 N. FEDERAL HWY
DEERFIELD BEACH FL 33441

Mailing Address
142 N. FEDERAL HWY
DEERFIELD BEACH FL 33441

DO NOT WRITE IN THIS SPACE.

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified		3a. Date of Last Report	
21		26		03/05/1982		01/28/1994	
22		27		4. FEI Number		Applied For	
23		28		59-2171097		Not Applicable	
24		29		5. Certificate of Status Desired		8.75 Additional Fee Required	
25		30		6. Election Campaign Financing		5.00 May Be Added to Fees	
26		31		7. This corporation has liability for intangible tax under S. 199.032, Florida Statutes		Yes No	

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

ANNUNZIATO, JOY
142 N. FEDERAL HWY
DEERFIELD BCH FL 33441

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
85 Zip Code

FL

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)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PST	1.1 TITLE	☐ Change ☐ Addition
NAME	ANNUNZIATO, JOY	1.2 NAME	
STREET ADDRESS	142 N. FEDERAL HWY	1.3 STREET ADDRESS	
CITY-ST-ZIP	DEERFIELD BCH, FL 00000	1.4 CITY-ST-ZIP	
TITLE	VP	2.1 TITLE	☐ Change ☐ Addition
NAME	ANNUNZIATO, CARMEN	2.2 NAME	
STREET ADDRESS	142 N. FEDERAL HWY	2.3 STREET ADDRESS	
CITY-ST-ZIP	DEERFIELD BCH, FL 00000	2.4 CITY-ST-ZIP	
TITLE		3.1 TITLE	☐ Change ☐ Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	☐ Change ☐ Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 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)(b), 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:

Signed and sealed by the registered agent or director

1/18/95 (805) 426-4022