FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00 **PROFIT CORPORATION** Sandra B. Mortham **ANNUAL REPORT** Secretary of State 1998 DIVISION OF CORPORATIONS **DOCUMENT** # F81529 (2)LILIA'S BEAUTY CORPORATION Mailing Address

FILED Apr 29 1998 8:00am Secretary of State



8273 SW 124TH ST MIAMI FL 33156-5957 US		8273 SW 124TH STREET MIAMI FL 33156-5957 US				DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 05/10/1982	
2. Principal Pi	lace of Business	2a. Mailing Address	2a. Mailing Address				Applied For
21		26	26			59-2209428	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, otc.				I h Controlle of Status Desired I I '	Additional
22 Oit - 2 Ct-4		City & Ctoto	City & State				Required
City & State		28	28			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Faes	
Zip	Country	Ζφ	Coun	itry	or mile deliperation of the part and delivery year international		
24	25	29 30		Personal Property Tax due June 30. Yes No 10. Name and Address of New Registered Agent			
9. Name and Address of Current Registered Agent					Name	To, Mario and Address of Non Hogistoria Again	
CARMONA, LIDIA 8735 SW 52 STREET							
-	VMI FL 33165		18	82 Street Addres		Idress (P.O. Box Number is Not Acceptable)	
	WIN (2 00 100		1	B3			
			1	84	City	FL 85 Zi	p Code
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 period have of registered agent and televicapid rabbe. (NOTE: Registered Agent agrature required when reinstating) DATE							
12.		ND DIRECTORS	13.	Agei	4 B Griature Tolq	ADDITIONS/CHANGES TO OFFICERS AND DIRECTO	ORS IN 12
TITLE	PT	DELETE	1.1 TITL	.E		Changi	
NAME	CARMONA, LILIA	_	1.2 NAN				
STREET ADDRESS	8735 S.W. 52ND STREET		1.3 STREET ADDRESS		ADDRESS		
City-St-ZIP	MIAMI FL 33125		1.4 CITY	Y-ST	I- ZIP		
TITLE	VS □ DELETE 2.1			.Ę		Changi	e 🔲 Addition
NAME	CARMONA, JORGE		2.2 NAME				
STREET ADDRESS	8735 S.W. 52ND STREET		2.3 STR	EET #	ADDRESS		
CITY-ST-ZIP	MIAMI FL 33165		2. 4 CITY- ST-		7 - 7IP		
TITLE	DELETE 3.			3.1 TITLE		L Change	e L_ Addition
NAME			3 2 NAN	3.2 NAME		•	
STREET ADDRESS			3.3 STR	EET #	ADDRESS		
CITY-ST-ZIP		T course	3.4. CIT		r-zip	D Division	. Addition
TITLE		L_I DELETE	4.1 TITL			[_] Change	e 🔲 Addition
NAME			4. 2 NAI				
STREET ADDRESS					ADDRESS		
CITY-ST-ZIP		DELETE	4.4 CH \ 5.1 TITL		- ZIP	Changi	e Addition
TITLE		L DELETE				C Statig	, L. Mandon
NAME OTDEET ADDRESS			5.2 NAM		ADDRESS		
STREET ADDRESS							
CITY-ST-ZIP TITLE		DELETE	5.4 CITY 6.1 TITL		-114	Change	e Addition
NAME		time corrects	6.1 MA				
STREET ADDRESS					AUDBESS		
			63 STREFT ADDRESS 64 CITY - ST - ZIP				
CITY-ST-ZIP			■ 64 CH1	1-51	- 415		

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 trusts empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in officer or director of the corporation of the receiver Block 12 or Block 13 if changed or an attachment