FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1996

DOCUMENT #
1. Corporation Name

F93000003120 (3)

	HAIRS'	tylists management s	YSTEMS, INC.								
Pri	ncipal Place o	of Business	Mailing Address							AU IU 11011 UDIE 1001	
12700 INDUSTRIAL PARK BLVD PLYMOUTH MN 55441 US			12700 INDUSTRIAL PARK BLVD PLYMOUTH MN 55441 US								
						3. Date Incorporated or Qualified 06/29/1993	3a. Date of Last Report 04/28/1995				
2.	Principal Plac	ce of Business	2a. Mailing Address				4. FEI Number Apple				_
21			26]				41-1748342		60.7	Not Applicable	
22	Surte, Apt. #,	, etc.	Suite, Apt. #, etc.	¬ ' '			5. Certificate of Status Desired			5 Additional Required	
23	City & State		City & State	City & State			Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees			
.3	Zıp	Country	Zip		ıntry		8. This corporation has liability for it				7
24		25	29	30	r		Florida Statutes Yes				_
		9. Name and Address of Currer	nt Registered Agent		81	Name	10. Name and Address of New R	egisterea A	gent		-
					01	Name					
THE PRENTICE-HALL CORPORATION SYSTEM, INC. 1201 HAYS STREET						Street Add	ress (P.O. Box Number is Not Acceptab	le)			
	SUITE 1				83						
		ASSEE FL 32301			84	City			85	Zip Code	\dashv
								<u> </u>			
11	or registere	the provisions of Sections 607.0502 d agent, or both, in the State of Flori n, and accept the obligations of, Sect	ida. Such change was author	ized by the (corp	named corpo oration's boa	ration submits this statement for the pur ird of directors. I hereby accept the app	pose of char pintment as r	.ging its egisteri	; registered offic ad agent. I am	е
SIG	gnature	lignature, typod or printed name of registered agen	1 and title if annication (1)	VOTE: Rogisterer	1 Amer	it signature require	ad when reinstating)	DATE			
12			ID DIRECTORS	13.	, Chr.	it signature respire	ADDITIONS/CHANGES TO OFF		DIREC1	ORS IN 12	\neg
TITI		DC	DELETE	1.11	ITLE] Changi	e 🔲 Addition	_
NA!	ME	SPIEGEL, RICHARD G		1.2 N	1.2 NAME 1.3 STREET ADDRESS						
STE	REET ADDRESS	12700 INDUSTRIAL PARK E	3LVD	1.3 S							
CiT	Y-ST-7IP	PLYMOUTH MN		1.4 CITY-1							
TiT	l E	D	DELETE	TE 2 1 TIT) Changi	Addition	
NAI	ME	COHEN, ELLIOT		2.2 NAM							
STE	REFI ADDRESS	12700 INDUSTRIAL PARK E	3LVD	235	TREET	ADDRESS					
ŢίΩ	Y-ST-ZiP	PLYMOUTH MN				ST - Z IP					
Till	LÉ	DS	☐ DELETE	3.13	ITLE] Chang	e Addition	
NA	ME	SHERMAN, MORRIS M		3 2 N	AME						
STR	REET ADDRESS	150 SO. 5TH ST., STE. 230)0	3 3. 9	STREE	t address					
CII	Y-SI-ZIP	MINNEAPOLIS MN 55402				S1 - ZIP		-			_
M	LE	DP	☐ DELETE	4, 1]				L] Chang	e	
NA.	ME	KUNIN, MICHAEL		42 N	AME						
STE	REET ADDRESS	12700 INDUSTRIAL PARK E	SLVU	438	THEET	ADDRESS					
	Y-ST-ZIP	PLYMOUTH MN	D britte			ST-7IP			Chang	a	-
TIT		PROOFE MOUATI	☐ DELETE	5 11				L	Licens	3 Addition	
NA.		BROOKS, MICHAEL	oi V r n	5.2 N							
	REET ADDRESS	12700 INDUSTRIAL PARK E PLYMOUTH MN)L V U	1		I ADDRESS					
	TY-ST-ZIP	CD CD	DELETE	5.4 C	_	ST-ZIP		Г] Chang	a Addition	
TIT NA		KUNIN, DANIEL	Cocce	621				L.	8		
	REET ADDRESS	12700 INDUSTRIAL PARK E	ALVD.			T ADDRESS					
-	IY-SI-ZIP	PLYMOUTH MN	erap v pař t			ST-ZIP					
14	I do bereby	certify that the information supplied	with this filing is voluntarily fu	rnished and	doe	s not qualify	for the exemption stated in Section 119	.07(3)(k), Flor	da Sta	utes. I further	_
	certify that oath: that I	the information indicated on this and	nual report or supplemental ar poration or the receiver or trus	nnual report tee empowe	is tre	ue and accura	ate and that my signature shall have the is report as required by Chapter 607, Fi	same legal 6	effect as	s if made under	

appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: M.D. BRODES TREASURER 3/13/46 (612)550~1332

Baytone Prove #