# 2004 FOR PROFIT-CORPORATION ANNUAL REPORT

#### DOCUMENT # F95000006247

1. Entity Name

SALLY BEAUTY DISTRIBUTION, INC.



Principal Place of Business

3900 MORSE ST DENTON, TX 76208 Mailing Address

2525 ARMITAGE AVENUE C/O TAX DEPARTMENT MELROSE PARK, IL 60160

US

# FILED Apr 26, 2004 8:00 am Secretary of State

04-26-2004 90548 015 \*\*\*150.00

54040036



## DO NOT WRITE IN THIS SPACE

03182004 No Chg-P

CR2E034 (10/03)

4. FEI Number 75-2624245 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324

# DO NOT WRITE IN THIS SPACE

| The above named entity submits this statement for the purpose of | of changing its reg | gistered office or i | registered agent, | or both, in the S | tate of Florida. | I am familiar with, and accept |
|--|---------------------|----------------------|-------------------|-------------------|------------------|--------------------------------|
| the obligations of registered agent.                             |                     |                      |                   |                   |                  |                                |
|  |                     | 16.                  | Service Control   |                   |                  |                                |

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

#### FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00

 Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

| 10.  | OFFICERS AND DIRECTORS                       |  |  |
|--|--|--|--|
| TITLE  | D  |  |  |
| NAME   | LAVIN, LEONARD H                             |  |  |
| STREET ADDRESS   | 2525 ARMITAGE AVE                            |  |  |
| CITY-ST-ZIP  | MELROSE PARK, IL                             |  |  |
| TITLE  | D  |  |  |
| NAME .   | BERNICK, HOWARD B                            |  |  |
| STREET ADDRESS   | 2525 ARMITAGE AVE                            |  |  |
| CITY-ST-ZIP  | MELROSE PARK, IL 60160                       |  |  |
| TITLE  | PD   |  |  |
| NAME   | RENZULLI, MICHAEL                            |  |  |
| STREET ADDRESS   | 3900 MORSE ST                                |  |  |
| CITY-ST-ZIP  | DENTON, TX                                   |  |  |
| TITLE  | ST   |  |  |
| NAME   | LAVIN, BERNICE E                             |  |  |
| STREET ADDRESS   | 2525 ARMITAGE AVE                            |  |  |
| CITY-ST-ZIP  | MELROSE PARK, IL 60160                       |  |  |
| TITLE  | VP   |  |  |
| NAME   | WINTERHALTER, GARY                           |  |  |
| STREET ADDRESS   | 3900 MORSE ST                                |  |  |
| CITY-ST-ZIP  | DENTON, TX                                   |  |  |
| TITLE ·  | VP - Pro account of the second of the second |  |  |
| NAME   | KAHNEY, DEAN                                 |  |  |
| STREET ADDRESS   | 3900 MORSE ST                                |  |  |
| CITY-ST-ZIP  | DENTON, TX                                   |  |  |
| 12 I hereby certify that the information supplied with this filing does not qualify for the ever |  |  |  |

DO NOT WRITE IN THIS SPACE

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

AND TYPED OR PRINTED NAME OF SIGNING OFFICER OF DIRECTOR

4-15-64

708 450-2246

\_\_\_

Daytime Phone #

Sally Beauty Distribution, Inc

F.E.I.N.: 75-2624245 Fiscal Year Ended: 09/30/2003(

O:\Excel\Public\Officers & Directors List for all Companies\[\$BD.xls]Business

STATE OF:

Florida

#### Officers of Sally Beauty Distribution, Inc.

| OFFICERS          | TITLE                    | BUSINESS ADDRESS                               |  |  |
|-------------------|--------------------------|--|--|--|
| Michael Renzulli  | President                | 3900 Morse Street DentonTX -76208              |  |  |
| Gary Winterhalter | Executive Vice President | 3900 Morse Street<br>Denton, TX 76208          |  |  |
| Bernice E. Lavin  | Secretary and Treasurer  | 2525 Armitage Avenue<br>Melrose Park, IL 60160 |  |  |
| Gary Robinson     | Assistant Treasurer      | 3900 Morse Street<br>Denton, TX 76208          |  |  |
| Raal Roos         | Assistant Secretary      | 3900 Morse Street<br>Denton, TX 76208          |  |  |
| Reed Anders       | Assistant Treasurer      | 2525 Armitage Avenue<br>Melrose Park, IL 60160 |  |  |

### Board of Directors of Sally Beauty Distribution, Inc.

| DIRECTORS         | BUSINESS ADDRESS       |
|-------------------|------------------------|
| Leonard H. Lavin  | 2525 Armitage Avenue   |
|                   | Melrose Park, IL 60160 |
| Michael Renzulli  | 3900 Morse Street      |
|                   | Denton, TX 76208       |
| Howard B. Bernick | 2525 Armitage Avenue   |
|                   | Melrose Park, IL 60160 |