

**2003 FOR PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**


**FILED**  
**Apr 15, 2003 8:00 am**  
**Secretary of State**

04-15-2003 90107 040 \*\*\*150.00

0660990  
AT

**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**

2. Principal Place of Business  
Suite, Apt. #, etc.  
City & State  
Zip Country

3. Mailing Address  
Suite, Apt. #, etc.  
City & State  
Zip Country

4. FEI Number **75-2624245** Applied For  Not Applicable

5. Certificate of Status Desired  **\$8.75 Additional Fee Required**

**70041911**



CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

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

7. Name and Address of New Registered Agent

Name  
Street Address (P.O. Box Number is Not Acceptable)  
City FL Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2003 Fee will be \$550.00**  
**Make Check Payable to Florida Department of State**

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

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D LAVIN, LEONARD H 2525 ARMITAGE AVE MELROSE PARK IL</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D BERNICK, HOWARD B 2525 ARMITAGE AVE MELROSE PARK IL 60160</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>PD RENZULLI, MICHAEL 3900 MORSE ST DENTON TX</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>ST LAVIN, BERNICE E 2525 ARMITAGE AVE MELROSE PARK IL 60160</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>VP WINTERHALTER, GARY 3900 MORSE ST DENTON TX</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>VP KAHNEY, DEAN 3900 MORSE ST DENTON TX</b>	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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: reed anders **NO COPIES REQUIRED** 4-8-03 708 450-2246

REED ANDERS - ASSISTANT TREASURER SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (10/02)

Attachment 70041911  
DO# F95000006247

**Sally Beauty Distribution, Inc.**

**F.E.I.N.: 75-2624245**

**Fiscal Year Ended: 09/30/2002**

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

**STATE OF: Florida**

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

<u>OFFICERS</u>	<u>TITLE</u>	<u>BUSINESS ADDRESS</u>
Michael Renzulli	President	3900 Morse Street Denton, TX 76202
Gary Winterhalter	Vice President	3900 Morse Street Denton, TX 76202
Dean Kahney	Vice President	3900 Morse Street Denton, TX 76202
Bernice E. Lavin	Secretary/Treasurer	2525 Armitage Avenue Melrose Park, IL 60160
Gary Robinson	Assistant Treasurer	3900 Morse Street Denton, TX 76202
Raal Roos	Assistant Secretary	3900 Morse Street Denton, TX 76202
Reed Anders	Assistant Treasurer	2525 Armitage Avenue Melrose Park, IL 60160

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

<u>DIRECTORS</u>	<u>BUSINESS ADDRESS</u>
Leonard H. Lavin	2525 Armitage Avenue Melrose Park, IL 60160
Michael Renzulli	3900 Morse Street Denton, TX 76202
Howard B. Bernick	2525 Armitage Avenue Melrose Park, IL 60160