FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION



FLORIDA DEPARTMENT OF STATE

FILED Jan 29 1998 8:00am

	JAL REPORT 1998	2 7 7	Secretary of State DIVISION OF CORPORATION		Secretary of State
 Corporation 	MENT # F9700 UTE BEAUTY SUPPLIES IF	0003283 (5)		
Principal Plac 8144 W 26 A		Mailing Address 8144 W 26 AVE			
HIALEAH FL		HIALEAH FL 33016			DO NOT WRITE IN THIS SPACE
					3. Date Incorporated or Qualified
					06/23/1997
	lace of Business	2a. Mailing Address			4. FEI Number Applied For 98-0170192 Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			S8 75 Additional
22		27			5. Certificate of Status Desired Fee Required
City & State	e	City & State			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
Zip	Country	Zip	├	intry	8. This corporation owes or has paid the current year intangible
24	9. Name and Address of Curre	29 nt Registered Agent	30		Personal Property Tax due June 30. Yes No 10. Name and Address of New Registered Agent
HA	RT, GREGORY K			81 Nam	ne
8144 W 26 AVE				82 Stree	eet Address (P.O. Box Number is Not Acceptable)
HIALEAH FL 33016				83	
				84 City	FL
11. Pursuant office or r	to the provisions of Sections 607.056 egistered agent, or both, in the State	02 and 607.1508, Florida Statue of Florida, Sych change was	Ites, the a	bove-name d by the co	ned corporation submits this statement for the purpose of changing its registered corporation's board of directors. I hereby accept the appointment as registered
	m familiar with, and accept the oblig	gations of, Section 607.0505, F	Florida Sta	tutes.	
SIGNATURE	Signature, typed or printed name of registered ag	gent and little if applicable. (NC	OTE: Registere	d Agent signati	ature required when reinstating) DATE
12.		ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	CD CORDOBA, OMAIRA	DELETE	1,1 7		Change Addition
NAME STREET ADDRESS	PLAZA BANCOMER BLDG		1,2 N	avae Treet address	ec
City-ST-ZIP	REPUBLIC OF PANAMA			ITY-ST-ZIP	³³
TITLE	VD	DELETE	2.1 T		Change Addition
NAME	SAURI, ADOLFO		2.2 N	AME	
STREET ADDRESS	PLAZA BANCOMER BLDG REPUBLIC OF PANAMA			TREET ADDRESS	SS -
CITY-ST-ZIP	D D	DELETE	3.1 T	ITY-ST-ZIP	Change Addition
NAME	SALCEDO, RICARDO D		3.2 N		
STHEET ADDRESS	PLAZA BANCOMER BLDG		1	TREET ADDRESS	ss
CITY-ST-ZIP	REPUBLIC OF PANAMA		3.4. 0	ITY-ST-ZIP	
TITLE	V CDECODY K	L_] DELETE	4.1 T		Change Addition
NAME	HART, GREGORY K 8144 W 26 AVE		4.21		
STREET ADDRESS	HIALEAH FL			REET ADDRESS	35
CITY-ST-ZIP TITLE	110 (444) (11 4	DELETE	5,1 T	TY-ST-ZIP TLE	Change Addition
NAME		-	5.2 N		
STREET ADDRESS			5,3 S	TREET ADDRESS	ss
CITY - ST - ZIP_				TY-ST-ZIP	
TITLE	•	DELETE	6.1 T		Change Addition
NAME STREET ADDRESS	1		6.2 N		
CITY-ST-ZIP	ı		- 1	TREET ADDRESS TY-ST-ZIP	30

14. I hereby certify that the information supplied with this filling 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 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: