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

PROFIT CORPORATION ANNUAL REPORT

1997

HAIRPIN, INC.

3349 N.E. 33RD ST.

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FT.LAUDERDALE FL 33308

Suite. Apt. #, etc.

SIGNATURE:

City & State

2. Principal Place of Business



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # G35563

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(7)

FT.LAUDERDALE FL 33308-7109

3349 N.E. 33RD ST.

2a. Mailing Address

City & State

Suite, Apt. #, etc.

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9 Name and Address of Current Registered Agent

FILED Apr 07 1997 8:00am Secretary of State

3a. Date of Last Report

Applied For

\$8.75 Additional

Fee Required

\$5,00 May Be

Added to Fees

0263627

Not Applicable

02/29/1996

Yes No

This corporation has liability for intangible tax under s. 199.032,

10. Name and Address of New Registered Agent

3. Date Incorporated or Qualified

04/25/1983

59-2295131

5. Certificate of Status Desired

6. Election Campaign Financing

Trust Fund Contribution

Florida Statutes

4. FEI Number

Principal Place of Business  S MICHAEL MARINO	Mailing Address % MICHAEL MARINO	

Country

3349 N.E. 33RD ST. FT.LAUDERDALE FL 33308		81	Name	)		
		82	82 Street Address (P.O. Box Number is Not Acceptable)			
		83				
			84	City	85 Zip Code	
					FL [1]	
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						
12.	OFFICERS AND DIRECTORS	ile, (NOTE: Ne	13.	nt signatur	ire required when reinstating)  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DPST	DELETE	1.1 TITLE		Change Addition	
NAME.	MARINO, MICHAEL		1.2 NAME			
STREET ADORESS	3349 N.E. 33RD ST.	ľ	1.3 STREET	ADDRESS		
City+St+ZiF	FT. LAUDERDALE FL		1.4 CHY-S			
TIFLE		DELETE	2.1 TITLE		Change Addition	
NAME		ľ	2.2 NAME		sycapte	
STREET ADDRESS			2.3 STREET	address		
CiTY-ST-7IP			2.4 CITY-5	IT-ZIP		
TRILE		☐ DELETE	3.1 TITLE		Change Addition	
NAME.			3.2 NAME			
STREET ADDRESS			3.3 STREET	ADDRESS		
CITY -ST-ZIP			3.4. CITY - 9	T-ZIP		
me		DELETE	4.1 JITLE		Change Addition	
NAME		J	4.2 NAME			
STREET ADDRESS			4.3 STREET	ADORESS		
City - St - ZiP			4.4 CHTY - S	1-21P		
31715		DELETE	5.1 TITLE		L Change L Addition	
NAME			5.2 NAME			
STREET ADDRESS			5.3 STREET	<b>ADDRES</b> S		
CITY - S1 - ZIP			54 CITY - S	T-ZIP		
TILE		DELETE	61 TITLE		Change Addition	
NAME			6.2 NAME			
STREE* ADDRESS		ſ	6.3 STREET	address		
CITY - ST- ZIF			6.4 CiTY-S		1	
14. I do 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 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.						