

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

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **G53002**

1. Corporation Name

FRANK FINI'S MEN'S HAIR CENTER

Principal Place of Business

Mailing Address

**FRANK FINI'S MEN'S HAIR CENTER
5100 W. COMMERCIAL BLVD.
TAMARAC, FL. 33319-2834**

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24 25 29 30

9. Name and Address of Current Registered Agent

**FRANK FINI
5100 W. COMMERCIAL BLVD
TAMARAC, FL. 33319-2834**

1. Pursuant to the provisions of Sections 607.06(2) and 607.15(5), Florida Statutes, the above named corporation certifies that the purpose of changing its registered office or registered agent, or both, in the State of Florida, such change was made in accordance with the provisions of the law, and that the registered agent is familiar with and accepts the obligations of Section 607.06(5), Florida Statutes.

SIGNATURE

Signature of the person who is authorized to execute this report on behalf of the corporation.

DATE

12. OFFICERS AND DIRECTORS

TITLE **DP**
NAME **FRANK FINI**
STREET ADDRESS **5100 W. COMMERCIAL BLVD.**
CITY-STATE-ZIP **TAMARAC, FL. 33319-2834**

TITLE **DST**
NAME **CAROL FINI**
STREET ADDRESS **5100 W. COMMERCIAL BLVD.**
CITY-STATE-ZIP **TAMARAC, FL. 33319-2834**

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP

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CITY-STATE-ZIP

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP

14. I hereby certify that the information supplied on this report is true and correct to the best of my knowledge and belief, and that I am a resident of the State of Florida.

Block 12 or Block 13 if charged on a calendar with annual fees. Block 14 if charged on a calendar with annual fees.

SIGNATURE: **Carol Fini** **CAROL FINI**

FILED

MAR 25 PM 2:36
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

3. Date of Incorporation or Qualification

08-05-1983

4. FEI Number

59-2315482

Applied For
Not Applied For

5. Certificate of State Income Tax

\$8.75 Additional
Fee Required

6. Has the Corporation Made a
Trust Fund Contribution

\$5.00 May Be
Added to Fee

8. Has the Corporation Paid the current year Intangible
Personal Property Tax

[] Yes [] No

10. Name and Address of New Registered Agent

81. Name

82. Street Address, Suite, Box Number or Not Applicable

83.

84. City

FL 85. Zip Code

ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS IN 1999

2000002827362--9

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******150.00 ****150.00**

CR2E004-1-1991

AD

1-26-99 954-485-7660