

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**CORPORATION
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF STATE
Sandra B. Mathman
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

95 MAY -1 4 11:30

DOCUMENT # H43739 (2)

1. Corporation Name

ALL-SOUTH HEALTH AND BEAUTY AIDS, INC.

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

**1401 BRICKELL AVE.
#700
MIAMI FL 33131**

Registered Address

**1401 BRICKELL AVE.
#700
MIAMI FL 33131**

CONTACT WRITE IN THIS SPACE

3. Date incorporated or organized **02/08/1985** 3a. Date of Last Report **08/17/1994**

4. FIC Number **59-2491886** Applied For ☐ Not Applicable ☐

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

6. Election Campaign Filings and Proxy/Consent Contributions ☐ **\$5.00 May Be Added to Fees**

8. This corporation has not only a federal income tax number but also a Florida State Tax Number ☒ Yes ☐ No

2. List of Officers and Directors

21. Name and Address

2a. Mailing Address

26. Name and Address

22. Name and Address

27. Name and Address

23. Name and Address

28. Name and Address

24. Name and Address

29. Name and Address

30. Name and Address

9. Name and Address of Current Registered Agent

**KTG&S REGISTERED AGENT CORP
1401 BRICKELL AVE
#700
MIAMI FL 33131**

10. Name and Address of New Registered Agent

B1. Name

B2. Street Address (P.O. Box Number is Not Acceptable)

B3. City

B4. State

FL

B5. Zip Code

11. I, the undersigned, certify that the information furnished on this report is true and correct to the best of my knowledge and belief, and that I am a director, officer, or shareholder of the corporation. I am not a director, officer, or shareholder of the corporation.

Signature

Print Name

Signature

Print Name

Signature

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Signature

Print Name

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Print Name

Signature

Print Name

**DPST
BECK, JEFF
9372 N.W. 101 ST.
MEDLEY FL 33178**

13. Signature

14. Signature

15. Signature

16. Signature

17. Signature

18. Signature

19. Signature

20. Signature

21. Signature

22. Signature

23. Signature

24. Signature

25. Signature

26. Signature

27. Signature

28. Signature

29. Signature

30. Signature

SIGNATURE:

SIGNATURE AND TITLE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Jeff Beck, Pres

4 21 7

3-5 953 1519