

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 9, 1995.
AMOUNT DUE ON OR BEFORE 8/9/95 \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375)



1995

DOCUMENT # J32281 (4)

QUICK CARE MEDICAL TREATMENT CENTERS, INC.

% BESSIE JOAN LEVIN
PO BOX 250723
HOLLY HILL FL 32125
US

% BESSIE JOAN LEVIN
PO BOX 250723
HOLLY HILL FL 32125
US

09/03/1986

03/11/1994

59-2713526

\$8.75 Additional
Fee Required

\$5.00 May Be
Added to Fee

9 Name and Address of Current Registered Agent

LEVIN, BESSIE JOAN
645 RIDGEWOOD AVE
HOLLY HILL FL 32017

10 Name and Address of New Registered Agent

FL

DP
LEVIN, BESSIE JOAN
645 RIDGEWOOD AVE
HOLLY HILL FL
VP
LEVIN, HERBERT L.
645 RIDGEWOOD AVENUE
HOLLY HILL FL
-ST-
LEVIN, CYNTHIA G.
645 RIDGEWOOD AVENUE
HOLLY HILL FL
-D-
LEVIN, JOHN A
645 RIDGEWOOD AVE
HOLLY HILL FL

D

ST

SIGNATURE:

John Levin

6-22-95

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

1995



FILED

DOCUMENT # J33799

(4)

CASTLE PROPERTY SERVICES INC.

1081 N. LK. SYBELIA DRIVE
MAITLAND FL 32751

1081 N. LK. SYBELIA DRIVE
MAITLAND FL 32751

09/18/1986

06/28/1994

59-2866545

\$8.75 Additional
Fee Required

\$5.00 May Be
Added to Fees

9. Name and Address of Current Registered Agent

BURT, RALPH A., II
1081 N. LK. SYBELIA DRIVE
MAITLAND FL 32751

10. Name and Address of New Registered Agent

FL 85

D
SPIRES, GEORGE E., II
830 PINAR DRIVE
ORLANDO FL
PD
BURT, RALPH A., II
1081 N. LK. SYBELIA DR.
MAITLAND FL

SIGNATURE:

Ralph A. Burt II 6/24/95 (407) 645-3540

SECOND NOTICE. CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 9, 1995.
AMOUNT DUE ON OR BEFORE 8/9/95 \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375)



1995

DOCUMENT # J35623 (4)

UNITED STATES BRONZE SIGN COMPANY OF FLORIDA, IN
C.

811 SECOND AVENUE
NEW HYDE PARK NY 11040

811 SECOND AVENUE
NEW HYDE PARK NY 11040

1 09/30/1986 3a 06/24/1994

4 58-1700104

\$8.75 Additional
Fee Required

\$5.00 May Be
Added to Fee

10 Name and Address of New Registered Agent

FL

BERGER, WILLIAM
1630 N. FEDERAL HWY.
FT. LAUDERDALE FL 33305

P
KASTEN, ALAN
90-60 UNION TPPE
GLENDALE, NY.
VP
BARBEOSCH, GEORGE
71-34 CENTRAL AVE.
GLENDALE, NY.

SIGNATURE: *George A. Barbeosch*

0170735 FN

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

1995

DOCUMENT # J36240 (6)

U.S. MEDICAL SUPPLIES INC.

8000 N.W. 31ST ST
SUITE 9
MIAMI FL 33122

13831 S.W. 59TH STREET
SUITE 101 A
MIAMI FL 33183
US

09/29/1986 10/31/1994

65-0232571

\$8.75 Additional
Fee Required

\$5.00 May be
Added to Fee

9 Name and Address of Current Registered Agent

WU, RUDY
8000 N.W. 31ST STREET
SUITE 9
MIAMI FL 33122

10 Name and Address of New Registered Agent

FL

PVD
WU, RUDY
8000 N.W. 31ST STREET, STE. 9
MIAMI FL 33122

SIGNATURE:

June 19 95 305-477-6347

**SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 9, 1995.
AMOUNT DUE ON OR BEFORE 8/9/95: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375)**

1995

DOCUMENT # J36847 (8)

HAIR MANIA, INC.

% VICKI L. ROBERTS
1481 S. MILITARY TR.
WEST PALM BEACH FL 33415

% VICKI L. ROBERTS
1481 S. MILITARY TR.
WEST PALM BEACH FL 33415

3. Date of Incorporation or Reincorporation	10/08/1986	4. Date of Last Report	05/01/1994
5. Filing Number	59-2720274	6. Agreed For	Not Applicable
7. Contribution of Status (Amount)		8. \$8.75 Additional Fee Required	
9. \$5.00 May Be Added to Fees			
10. This corporation has liability for registration fees for the period			
11. \$5.00			

9. Name and Address of Current Registered Agent

ROBERTS, VICKI L.
1481 S. MILITARY TR.
WEST PALM BEACH FL 33415

10. Name and Address of New Registered Agent

12. Name	
13. Home Number or Not Applicable	
14. Address	
15. City	
16. State	FL
17. Zip	

11. I, the undersigned, being a resident or officer of the corporation, do hereby certify that the information furnished on this form is true and correct. I am aware that this statement is a part of the public record and that any false statement may be subject to criminal sanctions and/or civil penalties for providing false information.

12. DP ROBERTS, VICKI L. 1481 S. MILITARY TR. W. PALM BEACH FL VP ZODIE R. THOMAS 1481 S. MILITARY TRAIL WEST PALM BEACH FL	13. Change Add
14. Name	
15. Home Number or Not Applicable	
16. Address	
17. City	
18. State	
19. Zip	
20. Name	
21. Home Number or Not Applicable	
22. Address	
23. City	
24. State	
25. Zip	
26. Name	
27. Home Number or Not Applicable	
28. Address	
29. City	
30. State	
31. Zip	
32. Name	
33. Home Number or Not Applicable	
34. Address	
35. City	
36. State	
37. Zip	

SIGNATURE: *Vicki Roberts*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNER OF RETURN TO DIRECTOR

6/20/95 (401) 969-1559