

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

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. McHugh
Secretary of State
Tallahassee, Florida 32399-0001

DOCUMENT # J78360

(1)

THE RIGHT DIRECTION HAIR DESIGN, INC.

APPROVED
AND
FILED

95 MAY -1 AM 9:1

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

Principal Place of Business		Mailing Address		3. Date incorporated or Chartered		3a. Date of Last Report																																																													
% ROBERT W. SHOE, JR. 4215 SOUTH FLORIDA AVE. LAKELAND FL 33813		% ROBERT W. SHOE, JR. 4215 SOUTH FLORIDA AVE. LAKELAND FL 33813		06/15/1987		07/26/1994																																																													
2. Principal Place of Business		2a. Mailing Address		4. FEI Number		Applied For																																																													
21		26		59-2793743		Not Applicable																																																													
22		27		5. Certificate of Status Desired		[] \$8.75 Additional Fee Required																																																													
23		28		6. Election Campaign Finance Trust Fund Contribution		[] \$5.00 May Be Added to Fees																																																													
24		25		29		30																																																													
9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent																																																															
SHOE, ROBERT W., JR. 4215 SOUTH FLORIDA AVE. LAKELAND FL 33813				81. Name																																																															
				82. Street Address (P.O. Box Number is Not Acceptable)																																																															
				83.																																																															
				84. City																																																															
				FL 85. Zip Code																																																															
11. Pursuant to the provisions of Sections 607.01(2)(b) and 607.15(8), Florida Statutes, the above named corporation submits this statement for the purpose of removing its registered office or registered agent as shown on the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment of registered agent. I am familiar with and accept the provisions of Section 607.01(2)(b), Florida Statutes.																																																																			
SIGNATURE _____																																																																			
12. OFFICERS AND DIRECTORS																																																																			
13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS																																																																			
<table border="1"> <tr> <td>NAME</td> <td>D ALLEN, DONNA</td> <td>4215 S. FLORIDA AVE.</td> <td>LAKELAND FL</td> <td>Change</td> <td>Add</td> </tr> <tr> <td>NAME</td> <td>D SHOE, ROBERT W. JR</td> <td>3036 BELLWOOD AVE.</td> <td>LAKELAND FL</td> <td>Change</td> <td>Add</td> </tr> <tr> <td>NAME</td> <td></td> <td></td> <td></td> <td>Change</td> <td>Add</td> </tr> <tr> <td>NAME</td> <td></td> <td></td> <td></td> <td>Change</td> <td>Add</td> </tr> <tr> <td>NAME</td> <td></td> <td></td> <td></td> <td>Change</td> <td>Add</td> </tr> <tr> <td>NAME</td> <td></td> <td></td> <td></td> <td>Change</td> <td>Add</td> </tr> <tr> <td>NAME</td> <td></td> <td></td> <td></td> <td>Change</td> <td>Add</td> </tr> <tr> <td>NAME</td> <td></td> <td></td> <td></td> <td>Change</td> <td>Add</td> </tr> <tr> <td>NAME</td> <td></td> <td></td> <td></td> <td>Change</td> <td>Add</td> </tr> <tr> <td>NAME</td> <td></td> <td></td> <td></td> <td>Change</td> <td>Add</td> </tr> </table>								NAME	D ALLEN, DONNA	4215 S. FLORIDA AVE.	LAKELAND FL	Change	Add	NAME	D SHOE, ROBERT W. JR	3036 BELLWOOD AVE.	LAKELAND FL	Change	Add	NAME				Change	Add	NAME				Change	Add	NAME				Change	Add	NAME				Change	Add	NAME				Change	Add	NAME				Change	Add	NAME				Change	Add	NAME				Change	Add
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14. I, the undersigned, certify that the information furnished on this form is true and correct, and that the person named is the person named in the form. I am a resident of the State of Florida and am at least 18 years of age at the time of filing this report. I am a resident of the State of Florida and am at least 18 years of age at the time of filing this report. I am a resident of the State of Florida and am at least 18 years of age at the time of filing this report.																																																																			
SIGNATURE: _____																																																																			
ROBERT W SHOE JR																																																																			