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Mar 26 1998 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998



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

Mar 26 1998 8:00am  
Secretary of State

DOCUMENT # K04524 (0)  
1. Corporation Name  
EXCLUSIVELY YOURS HAIR AND NAIL DESIGN, INC.

Principal Place of Business  
1164 ROYAL PALM BEACH BLVD.  
CROSSROAD PLAZA  
ROYAL PALM BEACH FL 33411  
US

Mailing Address  
2010 Galleon Cove Circle  
1299 STONEYWAY LANE  
WEST PALM BEACH, FL  
ROYAL PALM BEACH FL 33411  
FLA 33418

2. Principal Place of Business  
21 Suite, Apt. #, etc.  
22 City & State  
23 Zip  
24 Country

2a. Mailing Address  
26 Suite, Apt. #, etc.  
27 City & State  
28 Zip  
29 Country

3. Date Incorporated or Qualified  
12/02/1987  
4. FEI Number  
65-0029030  
5. Certificate of Status Desired  
6. Election Campaign Financing  
Trust Fund Contribution  
8. This corporation owes or has paid the current year intangible  
Personal Property Tax due June 30.

9. Name and Address of Current Registered Agent  
FITZGERALD PATRICIA A  
1164 ROYAL PALM BCH FLA  
CROSSROADS PLAZA  
ROYAL PALM BEACH FL 33411

10. Name and Address of New Registered Agent  
81 Name  
82 Street Address (P.O. Box Number is Not Acceptable)  
83  
84 City  
85 Zip Code

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  
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS  
TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
TE  
P  
FITZGERALD, PATRICIA ANN  
1299 STONEYWAY LANE  
WEST PALM BEACH, FL 33411  
Patricia Fitzgerald  
7010 Galleon Cove Circle  
Palm Beach Gardens, FL 33418  
-18  
TE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  
1.1 TITLE  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP  
2.1 TITLE  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP  
3.1 TITLE  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP  
4.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP  
5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP  
6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(j), 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.

SIGNATURE: Patricia A. Fitzgerald 3/19/98 561-798-1782  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone # 0321933

CB2E034 (10/97)