

FILE NOW: FILING FEE AFTER MAY 1 IS \$55.00

APPROVED  
AND  
FILED

10/2

97 FEB 20 PM 1:00

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



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

DOCUMENT # K01559  
1. Corporation Name

HAIR DYNAMICS OF THE TREASURE COAST, Inc.

Principal Place of Business

Mailing Address

259 Kelsey Park Circle  
Palm Beach Gardens, FL 33410

3. Date Incorporated or Qualified  
3-88

3a. Date of Last Report  
1995

2. Principal Place of Business  
21 259 Kelsey Park Circle

2a. Mailing Address

26

4. FEI Number  
65-0045769

Applied For  
Not Applicable

22

27

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

23 Palm Beach Gardens

28

6. Election Campaign Financing  
Trust Fund Contribution ☐

\$5.00 May Be  
Added to Fees

24 33410

25

29

Country

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

Robert F. Maruszczak  
259 Kelsey Park Circle  
Palm Beach Gardens, FL 33410

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 607.0502 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 and I am familiar with and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: Robert Maruszczak

(NOTE: Registered Agent signature required when reinstating)

DATE

2/14/97

OFFICERS AND DIRECTORS

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 NAME  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP  
1.1 TITLE  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP

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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

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14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: Robert F. Maruszczak ROBERT MARUSZCZAK

FEB 14 97 561-6254922

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/96)



pg. 2 of 2

February 7, 1997

Division of Corporation  
P.O. Box 6327  
Tallahassee, Florida  
32314

To whom it may concern:

I am writing in regards to our telephone conversation February 6, asking you to wave my penalty fee because of something I could not control. The annual report forms for 1996 and 1997 have been sent to a Port St. Lucie address that I am not aware of. My corporation, to my knowledge, hasn't missed a payment for 10 years. It never occurred to me that I was negligent until I received a call from an officer at the Barnett bank. Please note my correct mailing address below and except my apology. Thank you.

Sincerely,

Robert F. Maruszczak, President