FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # K12582

E & D HAIR PRODUCTIONS, INC.

LILED
Jan 28, 1999 8:00am
Secretary of State
01 20 1000 00040 042 skiliski 50 00

EH ED

	•	
_ (# 15 E 10 to E 11 E E E E E E E E	I MINIT BINCL BENEL MINIT LEGI
		. 18 1 18 1 1 18 18 18 18 18 18 18 18 18

					•	,				
Principal Plac	e of Business	Mailir	ng Address				(15816(02 1318 1324 1127 1121 1131 1131			
	NORTH FEDERAL HIGHWAY. #44 3045 NORTH FEDERAL HIGHWAY. #44 FORT LAUDERDALE FL 33306 FORT LAUDERDALE FL 33306			DO NOT WRITE IN THIS SPACE						
		•					3. Date Incorporated or Qualifed		· · · · · · · · · · · · · · · · · · ·	1
							01/21/1988			
2. Principal F	Place of Business	. 2a. M	lailing Address			•	4. FEI Number	Ar	pplied For	1 -
21		26					65-0035626	No	ot Applicable] ÷
Suite, Apt.	#, etc.	27	uite, Apt. #, etc.				5. Certificate of Status Desired		Additional equired] ;
City & Sta	te	28	ity & State				6. Election Campaign Financing Trust Fund Contribution	•	May Be to Fees	
Zip	Country	Zi	P	Cou	intry	. تبد سن	■8. This corporation owes the current year I			·
24	25	29		30			Personal Property Tax.	☐ Yes	□No	4
	9. Name and Address of	of Current Register	ed Agent				10. Name and Address of New Registere	d Agent		4
	(DENOE EDIO D				81 Name		•			
	RENCE, ERIC D	naiau waa			82 Street	Addres	is (P.O. Box Number is Not Acceptable)			1
" JUT	5 NORTH FEDERAL HIGH									1
FOF	rt Lauderdale fl 3330	6			83					
					84 City		** *** *** *** *** *** *** *** *** ***	85 Zip	Code	1
and a time of		* 170.					<u> </u>	<u>L </u>		_
office or	to the provisions of Sections registered agent, or both, in the am familiar with, and accept the	the State of Florida:	Such change was a	authorized	d by the corpo	corporation	ation submits this statement for the purpose is board of directors. I hereby accept the app	of changing its ointment as re	registered gistered	٠
SIGNATURE	· · · · · · · · · · · · · · · · · · ·						<u> </u>			
	Signature, typed or printed name of reg				Agent signature r	w beniupe				-} <u>@</u>
12.	,	CERS AND DIRECT	DELETE	13.	.	<u>·</u>	ADDITIONS/CHANGES TO OFFICERS A	AND DIRECTO	ORS IN 12 ☐ Addition	(11/98)
TITLE .	D CONTRACT FOR D	•	(_) DELETE	1.1 11				. 🗆 Gridinge		=
NAME	LAWRENCE, ERIC D.			1.2 N/						CRZE034
STREET ADDRESS				•	TREET ADORESS					18
CITY-ST-ZIP	FORT LAUDERDALE FL	1 33306					•••			1 100
TITLE		4		_+	ITY-ST-ZIP		·	□ Change	☐ Addition	1 ()
NAME			☐ DELETE.	2.1 Π	TLE		· ·	☐ Change	Addition	'
	•		☐ DELETE	2.1 π 2.2 N/	TLE AME			☐ Change	☐ Addition	
STREET ADDRESS			☐ DELETE.	2.1 TI 2.2 N/ 2.3 S1	TLE AME TREET ADDRESS		· · · · · · · · · · · · · · · · · · ·	☐ Change	☐ Addition	
CITY-ST-ZIP		- 1 - 24		2.1 Π 2.2 N/ 2.3 S1 2.4 C	TLE AME TREET ADDRESS CITY-ST-ZIP			· .·	·	
	Tames To the second	20 0	☐ DELETE	2.1 π 2.2 N/ 2.3 ST 2.4 C 3.1 T/	TLE AME TREET ADDRESS DTY-ST-ZIP TLE			☐ Change	☐ Addition	
CITY-ST-ZIP		ent a		2.1 TT 2.2 NV 2.3 ST 2.4 C 3.1 TT 3.2 NV	TLE AME TREET ADDRESS CITY-ST-ZIP TLE AME			· .·	·	
CITY-ST-ZIP		ent à la company de la company		2.1 TT 2.2 NV 2.3 ST 2.4 C 3.1 TT 3.2 NV 3.3 ST	TLE AME TREET ADDRESS OTY-ST-ZIP TLE AME TREET ADDRESS			· .·	·	
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP			□ DELETE	2.1 TT 2.2 NV 2.3 ST 2.4 C 3.1 TT 3.2 NV 3.3 ST 3.4. C	TLE AME TREET ADDRESS XITY-ST-ZIP TLE AME TREET ADDRESS XITY-ST-ZIP			☐ Change	Addition	
CITY-ST-ZIP TITLE NAME STREET ADDRESS				2.1 TI 22 NV 2.3 ST 2.4 C 3.1 TI 3.2 NV 3.3 ST 3.4. C 4.1 TI	TLE AME IREET ADDRESS ITY-ST-ZIP TLE AME IREET ADDRESS ITY-ST-ZIP TLE			· .·	☐ Addition	
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME			□ DELETE	2.1 TT 2.2 NV 2.3 ST 2.4 C 3.1 TT 3.2 NV 3.3 ST 3.4. C 4.1 TT 4.2 N	TLE AME ITREET ADDRESS ITY-ST-ZIP TLE AME ITREET ADDRESS ITY-ST-ZIP TLE ITREET ADDRESS ITY-ST-ZIP TLE IAME			☐ Change	Addition	
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME			□ DELETE	2.1 TT 22 NV 2.3 S1 2.4 C 3.1 TT 3.2 NV 3.3 S1 3.4 C 4.1 TT 4.2 N 4.3 S1	TLE AME ITREET ADDRESS ITY-ST-ZIP TLE AME ITREET ADDRESS ITY-ST-ZIP TLE IAME ITLE IAME ITLE IAME ITLE IAME ITLE IAME			☐ Change	Addition	
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP			□ DELETE	2.1 m 22 NV 2.3 S1 2.4 C 3.1 m 3.2 NV 3.3 S1 3.4 C 4.1 m 4.2 NV 4.3 S1 4.4 CI	TLE AME ITREET ADDRESS ITY-ST-ZIP TLE AME ITREET ADDRESS ITY-ST-ZIP TLE IAME ITREET ADDRESS ITY-ST-ZIP ITREET ADDRESS ITY-ST-ZIP			☐ Change	Addition	
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE			□ DELETE	2.1 TT 22 NV 2.3 S1 2.4 C 3.1 TT 3.2 NV 3.3 S1 3.4 C 4.1 TT 4.2 NV 4.3 S1 4.4 CI 5.1 TT 5.1 T	TLE AME ITREET ADDRESS ITY-ST-ZIP TLE AME ITREET ADDRESS ITY-ST-ZIP TLE ITREET ADDRESS ITY-ST-ZIP TREET ADDRESS ITY-ST-ZIP TREET ADDRESS ITY-ST-ZIP TLE			☐ Change	Addition	
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME			□ DELETE	2.1 TT 22 NV 2.3 S1 2.4 C 3.1 TT 3.2 NV 3.3 S1 3.4 C 4.1 TT 4.2 N 4.3 S1 4.4 CI 5.1 TT 5.2 NV	TLE AME IREET ADDRESS CITY-ST-ZIP TLE AME IREET ADDRESS CITY-ST-ZIP TLE IREET ADDRESS ITY-ST-ZIP TLE IREET ADDRESS ITY-ST-ZIP TLE AME			☐ Change	Addition	
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE			□ DELETE	2.1 TT 22 NV 2.3 S1 2.4 C 3.1 TT 3.2 NV 3.3 S1 3.4 C 4.1 TT 4.2 N 4.3 S1 4.4 CI 5.1 TT 5.2 NV 5.3 S1	TLE AME IREET ADDRESS ITY-ST-ZIP TLE AME IREET ADDRESS ITY-ST-ZIP TLE IREET ADDRESS ITY-ST-ZIP TLE AME IREET ADDRESS ITY-ST-ZIP TLE AME IREET ADDRESS			☐ Change	Addition	
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ DELETE	2.1 TT 22 NV 2.3 S1 2.4 CC 3.1 TT 3.2 NV 3.3 S1 3.4 CC 4.1 TT 4.2 NV 4.3 S1 4.4 CI 5.1 TT 5.2 NV 5.3 S1 5.4 CC	TLE AME ITREET ADDRESS ITY-ST-ZIP TLE AME ITREET ADDRESS ITY-ST-ZIP TLE ITREET ADDRESS ITY-ST-ZIP TLE AME ITREET ADDRESS ITY-ST-ZIP TLE AME ITREET ADDRESS ITY-ST-ZIP TLE AME ITREET ADDRESS ITY-ST-ZIP			☐ Change	Addition Addition	
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE			□ DELETE	2.1 TT 22 NV 2.3 S1 2.4 C 3.1 TT 3.2 NV 3.3 S1 3.4 C 4.1 TT 4.2 N 4.3 S1 4.4 CI 5.1 TT 5.2 NV 5.3 S1 5.4 CI 6.1 TT	TLE AME IREET ADDRESS ITY-ST-ZIP TLE AME IREET ADDRESS ITY-ST-ZIP TLE IREET ADDRESS ITY-ST-ZIP TLE AME IREET ADDRESS ITY-ST-ZIP TLE AME IREET ADDRESS ITY-ST-ZIP TLE TLE TLE TLE TLE TLE TLE TL			☐ Change	Addition	
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	CANADA CA		☐ DELETE	2.1 TT 22 NV 2.3 S1 2.4 C 3.1 TT 3.2 NV 3.3 S1 3.4 C 4.1 TT 4.2 N 4.3 S1 4.4 CI 5.1 TT 5.2 NV 5.3 S1 5.4 CI 6.1 TT 6.2 NV	TLE AME IREET ADDRESS ITY-ST-ZIP TLE AME IREET ADDRESS ITY-ST-ZIP TLE IREET ADDRESS ITY-ST-ZIP TLE AME IREET ADDRESS ITY-ST-ZIP TLE AME IREET ADDRESS ITY-ST-ZIP TLE TLE TLE TLE TLE TLE TLE TL			☐ Change	Addition Addition	

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)(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, with all other like empowered.

01/09/99 (954) 761-3961 Date Date Daytime Phone #