

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

INCORPORATED
ANN. A. REPORT
1995



FLORIDA DEPARTMENT OF STATE
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

APPROVED
AND
FILED

95 MAY 10 AM 10:35

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **K12883**

(0)

COWICKS & CURLS OF COUNTRY WALK, INC.

7166 SW 117 AV MIAMI FL 33183 US		% HOWARD SANDLER 6717 SW 112 COURT MIAMI FL 33173		DATE OF WHOLE IN THIS SPACE 3. Date of Incorporation or 2nd Report: 01/26/1988 3a. Date of Last Report: 04/27/1994	
2. Designated Officer or Directors	2b. Agent's Address	4. FIC Number	Appeal Fee		
21	26	65-0033035	Not Applicable		
22	27	5. Certificate of Status Desired	☐ \$8.75 Additional Fee Required ☐ \$5.00 May Be Added to Fees		
23	28	6. Election Campaign Financing	☐ Trust Fund Contribution ☐ This corporation has liability for intangible tax under FS 199.032		
24	29	7. Florida Statutes	☐ Yes ☐ No		
9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent			
SANDLER, HOWARD 6717 SW 112 COURT MIAMI FL 33173		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 601.01 and 602.01, Florida Statutes, this above named corporation submits this statement for the purpose of changing its registered office or registered agent, in part or in whole, in this 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 Sections 601.01 and 602.01, Florida Statutes.					
SIGNATURE					
12. OFFICERS AND DIRECTORS 13. ADDITIONAL CHANGES TO REGISTERED OFFICE AND DIRECTORS					
14. NAME	PD SANDLER, HOWARD 6717 SW 112 COURT MIAMI FL	15. NAME	☐ Change ☐ Addition		
16. NAME	STD SANDLER, NANCY 6717 SW 112 COURT MIAMI FL	17. NAME	☐ Change ☐ Addition		
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FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

5/18/95 10:25

DOCUMENT # K13836 (7)

1. Corporation Name

COMMERCIAL SERVICE & REPAIR, INC.

Principal Place of Business

Mailing Address

4702 N CLARK AVE
TAMPA FL 33614
US

4702 N CLARK AVE
TAMPA FL 33614
US

(DO NOT WRITE IN THIS SPACE)

3. Date Incorporated or Qualified

01/29/1988

3a. Date of Last Report

06/13/1994

4. FEI Number

59-2870572

Applied for

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes

☐ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21. Suite Apt # etc.

26. Suite Apt # etc.

22. City & State

27. City & State

23. Zip Country

28. Zip Country

24.

25.

29.

30.

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

MATTSON, RICK A.
7113 FIRST AVE S
ST PETERSBURG FL

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 607.05(1) and 607.15(3)(b), 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 further authorized to accept the qualifications of Sections 607.05(3), Florida Statutes.

SIGNATURE

12. Signature of Current Registered Agent

13. Signature of New Registered Agent

14.

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

12.1 NAME
DP
SMITH, LYNN A.
10705 CARROLAKE DRIVE
TAMPA FL

13.1 TITLE
13.2 NAME
13.3 STREET ADDRESS
13.4 CITY, ST, ZIP

12.2 NAME
DVP
DAWSON, CHARLES L.
8007 BEATTY GROVE DR.
TAMPA FL

13.5 TITLE
13.6 NAME
13.7 STREET ADDRESS
13.8 CITY, ST, ZIP

12.3 NAME
12.4 STREET ADDRESS
12.5 CITY, ST, ZIP

13.9 TITLE
13.10 NAME
13.11 STREET ADDRESS
13.12 CITY, ST, ZIP

12.4 NAME
12.5 STREET ADDRESS
12.6 CITY, ST, ZIP

13.13 TITLE
13.14 NAME
13.15 STREET ADDRESS
13.16 CITY, ST, ZIP

12.5 NAME
12.6 STREET ADDRESS
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13.17 TITLE
13.18 NAME
13.19 STREET ADDRESS
13.20 CITY, ST, ZIP

12.6 NAME
12.7 STREET ADDRESS
12.8 CITY, ST, ZIP

13.21 TITLE
13.22 NAME
13.23 STREET ADDRESS
13.24 CITY, ST, ZIP

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 199.07(3)(b), 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. 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 of this report or in any attachment with an address.

SIGNATURE:

CHARLOTTE ANN... PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Charles L. Dawson

5/18/95

813-931-8070