FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION
ANNUAL REPORT
1995

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

APPROVED AND FILED

95 MAY -1 AM 4:33

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **K32373** **(8)**

1. Corporation Name
OPTIMUM HAIR ARTISTS, INC.

Principal Place of Business
8369 N.W. 12 ST.
MIAMI FL 33126

Mailing Address
8369 N.W. 12 ST.
MIAMI FL 33126

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 09/06/1988
3a. Date of Last Report: 05/01/1994

2. Principal Place of Business — 21
2a. Mailing Address — 26
Suite, Apt. #, etc. — 22 / 27
City & State — 23 / 28
Zip — 24 / County — 25 / Zip — 29 / County — 30

4. FEI Number: 65-0071316 — 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 activity for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent
PADILLA, ORLANDO F.
8369 N.W. 12TH STREET
MIAMI FL 33126

10. Name and Address of New Registered Agent
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 Section 607.0505, Florida Statutes, the above named corporation submits the statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. The changes are authorized by the affirmative board of the corporation. I hereby accept the appointment as registered agent. I am familiar with and accept the duties and obligations of section 607.0505, Florida Statutes.

SIGNATURE: Orlando F. Padilla

12. OFFICERS AND DIRECTORS

TITLE: PSD
NAME: PADILLA, ORLANDO F.
ADDRESS: 10060 NW 9 ST CIR #15
CITY, ST, ZIP: MIAMI FL

13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS — ☐ Change ☐ Add

14. I hereby certify that the information supplied with this report is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on the annual report or supplemental annual report filed herewith is true and correct and that my signature shall have the same legal effect as if made under oath. That I am a director or officer of the corporation or the receiver or trustee empowered to execute the report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 or is listed on an attachment with an asterisk.

SIGNATURE: Orlando F. Padilla
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/26/95
Date

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