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

PROFIT CORPORATION ANNUAL REPORT

1999

DOCUMENT # KA6781



FLORIDA DEPARTMENT OF STATE .

## Katherine Harrls

Secretary of State
DIVISION OF CORPORATIONS

## FILED Apr 20, 1999 8:00 am Secretary of State

04-20-1999 90024 049 \*\*\*150.00

1. Corporatio	STYLES, INC.	, , , , , , , , , , , , , , , , , , ,									
Principal Plac	e of Business	Mailing Address					1 (301011)	E11 6(816 61111 (886) 1	10101 11 <b>0</b> 1 E(01	# #   #(#I) # #   #	1811 91911 1991
3324 GRIFFIN ROAD 3324 GRIFFIN ROAD						1					
DANIA FL 33312 DANIA FL 33312							DO NOT WRITE IN THIS SPACE				
US US						-	3. Date Incorporated or Qualifed				
						ļ	- 11/22/1988				
2. Principal Place of Business 2a. Mailing Address						-	4. FEI Number			Apr	plied For
21 26							65-00814	25		Not	t Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc.			etc.							\$8.75 A	dditional
27							5. Certifcate of	Status Desired		Fee Re	quired
City & State City & State							6. Election Campaign Financing \$5.00 May Be				
23							Trust Fund Contribution Added to Fees Added to Fees				
Zip	Country Zip			untry	ıntry		8. This corporation owes the current year Intangible				
24	25	29	30				Personal Pro	· •			□No
	9. Name and Address o	f Current Registered Agent		104	Maria		10. Name and	ddress of New	Registered	Agent	
VEA	DIMOND CUDISTODUED			81	Name						
YEARWOOD, CHRISTOPHER				82 Street Address (P.O. Box Number is Not Acceptable)					table)		
3324 GRIFFIN ROAD DANIA FL 33312											
DAN	IIA FL 33312			83							
				84	City				FI	85 Zip C	Code
				ļļ				statement for th		f changing its	registered
office or agent. I a	to the provisions of Sections registered agent, or both, in the same familiar with, and accept the same familiar with, and accept the same same same same same same same sam	607.0502 and 607.1508, Flori he State of Florida. Such chan he obligations of, Section 607.	ge was authorize 0505, Florida Sta	ed by to	the corpor	ration's	s board of directo	ors. I hereby acce	ept the appo	ointment as reg	gistered
SIGNATURE	Signature, typed or printed name of reg	intered agent and title if goaligable	(NOTE: Registen	ad Anadi	sionature rei	quired wt	hen reinstating)		DATE		
12.		ERS AND DIRECTORS	13		. o.g., a.c. o	4		HANGES TO O	FFICERS A	ND DIRECTO	RS IN 12
TITLE	DP		ELETE 1.1	TITLE						Change	☐ Addition
NAME	YEARWOOD, CHRISTO	PHER	1.2	NAME	1						
STREET ADDRESS	LOOP OF OUTLAND			1.3 STREET ADDRESS							
CITY-ST-ZIP	FORT LAUDERDALE FL		1.4	CITY-ST	-ZiP						
TITLE	VT			TITLE					-	Change	☐ Addition
NAME .	MELVIN, DONALD K		2.2	NAME					-		
STREET ADDRESS	4007 O F 04711 AVE			STREET	ADDRESS				•		
CITY-ST-ZIP	FT. LAUDERDALE FL 3	3316	2.4	CITY-S	T-ZIP						
TITLE				TITLE						Change	☐ Addition
NAME			3.2	NAME							
STREET ADDRESS			3.3	STREET	ADDRESS						
CITY-ST-ZIP			3.4.	ÇΠY-S	T-ZIP						
TITLE			ELETE 4,1	TITLE			,			Change	☐ Addition
NAME			4. 2	NAME							
STREET ADDRESS			4.3	STREET	ADDRESS						
CITY+ST-ZIP				CITY-S1	-ZIP		_				F77 A 1 1111
TILE		□ C		TITLE	1					Change	Addition
NAME				NAME							ļ
STREET ADDRESS	155 755				ADDRESS						
CITY-ST-ZIP	2 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -			CITY-ST	-ZIP						
TITLE				TITLE	Į					Change	☐ Addition
NAME											
				NAME							
STREET ADDRESS			6.3		ADDRESS		,				

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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/13/99 9549610300 Daytime Phone #

CR2E034 (11/9