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 # K65228

LAMAR'S HAIR DESIGNS, INC.

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Principal Plac	e of Business	Mailing Address			(10010311 014 01191 31114 11010 113	A1 (A1) B18(1 B181) B18(1 8:8	17 81811 818(1 1881
206 WEST OCEAN BLVD STUART FL 34994		206 WEST OCEAN BLVD STUART FL 34994		DO NOT WRIT	TE IN THIS SPACE		
					3. Date Incorporated or Qualifed		
					02/13/1989		
2. Principal P	Place of Business	2a. Mailing Address			4. FEI Number		Applied For
21		26			65-0102884		Not Applicable
Suite, Apt.		Suite, Apt. #, etc.			5. Certifcate of Status Desired	1 1	Additional, Required
City & Stat	te	City & State			Election Campaign Financing Trust Fund Contribution		May Be d to Fees
Zip	Country	Zip	Count	try	8. This corporation owes the curre		_
24	25		30		Personal Property Tax.	☐ Yes	□No
	9. Name and Address of Current			Name	10. Name and Address of New R	egistered Agent	
.BIN	IOD, VICKI J.		'	Name	•		
AN 10758 S.E. FEDERAL HIGHWAY			Ē	Street Add	ress (P.O. Box Number is Not Accepta	ble)	
	BE SOUND FL 33455		-	13	7 (1) (2) (1) (2) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	61. 7151. 81211 1281
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			. [8	4 City	A STATE OF THE SECOND S	FL 85 Zi	p Code
11: Pursuant	to the provisions of Sections 607.0502	and 607.1508. Florida Statute	s. the abo	ve-named com	poration submits this statement for the	purpose of changing	its registered
office or r	registered agent, or both, in the State of the familiar with, and accept the obligat	of Florida. Such change was au	thorized b	ov the corporation	on's board of directors. I hereby accep-	t the appointment as	registered
J		ions of, Section 607.0505, Fion	ua Statuti	55.			
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable. (NOTE: I	Registered A	gent signature require	ed when reinstating) &	DATE	*
12.	OFFICERS AND	DIRECTORS	13.		ADDITIONS/CHANGES TO OFF	ICERS AND DIREC	TORS IN 12
TITLE	DPS	☐ DELETE	1.1 TITLE		网络大大河 衛門	Chang	e
NAME	SHELL, LAMAR		1.2 NAM	E			
STREET ADDRESS			1.3 STRE	EET ADDRESS			
CITY-ST-ZIP	STUART FL		1.4 CITY	-ST-ZIP			
TITLE		☐ DELETE	2.1 TITLE	 		☐ Chang	e
NAME	}		2.2 NAM	E			
STREET ADDRESS	}		2.3 STRE	EET ADDRESS			
CITY-ST-ZIP	a graph graph graph of the control o	·	2. 4 CITY	-ST-ZIP			
TITLE	PO 2004 1	DELETE	3.1 TITLE	·	·	Chang	e
NAME ASSAULT		•	3.2 NAM	E]			
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CITY-ST-ZIP				ET ADDRESS		大台 사람들은 사람이 나를 이번 취임 사람이	3 . E / / 1101 1111
TITLE			3.4. CITY	'-ST-ZIP	点: 13. A. T.		STANGERS SEE
NAME		☐ DELETE	3.4. CITY 4.1 TITLE	'-ST-ZIP	据》:"最高的"强"。 时间不是一个人。	注: #	e Addition
THE WEST TO	Awaran.	☐ DELETE	3.4. CITY 4.1 TITLE 4. 2 NAM	'-ST-ZIP	的。 1887年(第二次) 1887年(第二次)	記 (計画) - A. A. A. A. A. A. A. Chang	e Addition
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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 changes, or on an attachment with an address, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

FILED

Jan 27, 1999 8:00am

Secretary of State

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