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

FILED
Jun 01 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998

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

DOCUMENT # L11491

1. Corporation Name

CAPE CORAL BEAUTY SCHOOL, INC.

Principal Place of Business / Mailing Address

1214 S.E. 47th Street
Cape Coral, Florida 33904

DO NOT WRITE IN THIS SPACE

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

3. Date Incorporated or Qualified: August 24, 1989

4. FEI Number: 65 0129160 — ☐ 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 owes or has paid the current year Intangible Personal Property Tax due June 30. ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

Betty Borchardt
1214 S.E. 47th Street
Cape Coral, FLorida 33904

10. Name and Address of New Registered Agent

81 Name: Keith R. Millard
82 Street Address (P.O. Box Number is Not Acceptable): 5120 S.W. 18th Avenue
83
84 City: Cape Coral FL 85 Zip Code: 33914

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE [signature] KEITH R. MILLARD PRESIDENT / TREASURER 5/15/98 ~~4/28/98~~

(Signature, typed or printed name of registered agent and title if applicable. NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS

TITLE	Director	☒ DELETE
NAME	Betty Borchardt	
STREET ADDRESS	1214 S.E. 47th Street	
CITY-ST-ZIP	Cape Coral, Fl 33904	
TITLE	President	☒ DELETE
NAME	Betty Borchardt	
STREET ADDRESS	1214 S.E. 47th Street	
CITY-ST-ZIP	Cape Coral, FL 33904	
TITLE	Secretary	☐ DELETE
NAME	Betty Borchardt	
STREET ADDRESS	1214 S.E. 47th Street	
CITY-ST-ZIP	Cape Coral, FL 33904	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	President/Director	☒ Change ☐ Addition
1.2 NAME	Keith R. Millard	
1.3 STREET ADDRESS	5120 S.W. 18th Avenue	
1.4 CITY-ST-ZIP	Cape Coral, Fl 33914	
2.1 TITLE	Vice President	☒ Change ☐ Addition
2.2 NAME	Delores J. Millard	
2.3 STREET ADDRESS	5120 S.W. 18th Avenue	
2.4 CITY-ST-ZIP	Cape Coral, Fl 33914	
3.1 TITLE	Secretary	☒ Change ☐ Addition
3.2 NAME	Helene M. Fields	
3.3 STREET ADDRESS	2905 Magnolia Street	
3.4 CITY-ST-ZIP	Fort Myers, Fl 33001	
4.1 TITLE	Treasurer	☐ Change ☒ Addition
4.2 NAME	Keith R. Millard	
4.3 STREET ADDRESS	5120 S.W. 18th Avenue	
4.4 CITY-ST-ZIP	Cape Coral, FL 33914	
5.1 TITLE		☐ Change ☐ Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		☐ Change ☐ Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

800002542308
-06/01/98--01057--040
***61.25

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.

SIGNATURE: [signature] KEITH R. MILLARD PRESIDENT / TREASURER 5/15/98 ~~4/28/98~~ 800-922-4564

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (10/97)