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

PROFIT CORPORATION **ANNUAL REPORT**

1998

Principal Place of Business

的复数含含物的变数用的可以在这种情况,是他们就是一个人,也可以是一个人,也可以是一个人,也可以是一个人,也可以是一个人,也可以是一个人,也可以是一个人,也可以是一个人, 1990年,我们就是一个人,我们就是一个人,我们就是一个人,我们就是一个人,我们就是一个人,我们就是一个人,我们就是一个人,我们就是一个人,我们就是一个人,也可以



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

(1)

Mailing Address

LADD HAIRDRESSERS, INC.

FILED Apr 09 1998 8:00am Secretary of State

2500 HOLLYWOOD BLVD. SUITE 212 HOLLYWOOD FL 33020		2500 HOLLYWOOD BLVD. SUITE 212 HOLLYWOOD FL 33020			DO NOT WRITE IN THIS SPACE
WOLL WOOD	7 E 3000	HOLETHOOD FE 33020			3. Date Incorporated or Qualified 08/31/1989
2. Principal Pi	ace of Business	2a. Mailing Address			4. FEI Number Applied For
21		26			65-0151936 Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired S8.75 Additional Fee Required
City & State		City & State			6. Election Campaign Financing \$5.00 May Be
23		28			Trust Fund Contribution
Zip Country		Zip Country		7	8. This corporation owes or has paid the cur/ent year Intangible
24	25	29 3	0		Personal Property Tax due June 30. 🛮 Yes 🔲 No
	9. Name and Address of Current	Registered Agent			10. Name and Address of New Registered Agent
MANELLA, ROSS H					
	00 HOLLYWOOD BLVD.		82 Street Add		Address (P.O. Box Number is Not Acceptable)
	HTE 212				,
HO	XLLYWOOD FL 33020		83		
			84	City	FL 85 Zip Code
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, typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) DATE					
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	PST	☐ DELETE	1.1 TITLE		Change Addition
NAME	WAINSTOCK, ROCHELLE		1.2 NAME		
STREET ADDRESS	10208 BERMUDA DR		1.3 STREE	ADDRESS .	0 11 4/ 2344
CITY-ST-ZIP	COOPER CITY FL		1.4 CITY-	ST-ZIP	Cooper City 71. 33026
TITLE		☐ DELETE	2.1 TITLE		Charfge Addition
NAME			2.2 NAME		
STREET ADDRESS			2.3 STREET ADDRESS		9
CITY-ST-ZIP			2. 4 CITY-ST-ZIP		
TITLE		☐ DELETE	3.1 TALE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-SI-ZIP			3.4. CITY-ST-ZIP		
TITLE		☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREE	T ADDRESS	
CITY-ST-ZIP		NA. PAN	4.4 CITY-1	ST-ZIP	
TITLE		☐ DELETE	5.1 TITLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS				T ADDRESS	
CITY-ST-ZIP		CT occurr	5.4 CITY-1	ST - ZIP	[] Abassa [] Assays
TITLE		DELETE	6.1 TITLE		Change Addition
NAME			6.2 NAME		
STREET ADDRESS				T ADDRESS	
CITY-ST-ZIP		this City of a second second second	6.4 CITY-	ST-ZIP	Continue 140 07/07/05 Florido Continue 14 de continue 15 de contin
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.					