



File on or before May 1, 1999 or Limited Liability Company will be subject to a \$ 400.00 LATE FEE.

LIMITED LIABILITY COMPANY ANNUAL REPORT 1999				FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS		FILED SECRETARY OF STATE DIVISION OF CORPORATIONS 99 MAR 11 PM 1:10	
FILING FEE \$ 188.75		Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee Make Check Payable To: FLORIDA DEPARTMENT OF STATE					
1. Name and Mailing Address of Limited Liability Company HAIR CUTTERY OF NORTH FLORIDA, L.C. 2815 HARTLAND ROAD FALLS CHURCH VA 22043				DOCUMENT # L96000000613			
2. Principal Place of Business		2a. Mailing Address		3. Date Organized or Qualified		3a. State of Formation	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		06/03/1996		FL	
City & State		City & State		4. FEI Number		<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable	
Zip		Country		54-1807879			
				5. Date of Last Report		6. Certificate of Status Desired	
				03/09/1998		<input checked="" type="checkbox"/> \$8.75 Additional Fee Required	
7. Name and Address of Current Registered Agent				8. Name and Address of New Registered Agent/Office			
UNITED STATES CORPORATION COMPANY 1201 HAYS STREET SUITE 105 TALLAHASSEE FL 32301				Name Street Address (P.O. Box Number is Not Acceptable) Suite, Apt. #, etc. 000002806050--7 City -03/15/99--01103--016 Zip Code ****188.75 ****188.75 FL			
9. Pursuant to the provisions of Sections 608.416 and 608.508, Florida Statutes, the above-named limited liability company 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 affirmative vote of a majority of the members. I hereby accept the appointment as registered agent, and accept the obligations.							
SIGNATURE _____				DATE _____			
(Registered Agent Accepting Appointment) (NOTE: Registered Agent Signature is required when a new agent is appointed.)							
10. Title	Managing Members/Managers		Business Street Address		City, State and Zip Code		
MEM	SCOTO, INC.		5150 BRIDLEWOOD COURT		PONTE VEDRA BEACH FL		
MEM	DIMPLES, INC.		2815 HARTLAND ROAD		FALLS CHURCH VA		
MEM	CREATIVE HAIRDRESSERS,		2815 HARTLAND ROAD		FALLS CHURCH VA		
11. I do 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 is true and accurate and that my signature shall have the same legal effect as if made under oath, that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes, and that my name appears in Block 10, or on an attachment with an address.							
SIGNATURE: 				3-3-99 (703) 698-7090			
SIGNATURE AND TYPE OR PRINTED NAME OF SPONSOR, MANAGING MEMBER OR MEMBER							