X Amended X MITED LIABILITY COMPANY

FILED **UNIFORM BUSINESS REPORT (UBR)** DOCUMENT # M01000000779 02 NOV 26 AM 9: 47 1. Entity Name HCM MANAGEMENT, LLC SECRETARY OF STATE TALLAHASSEE, FLORIDA DO NOT WRITE IN THIS SPACE 3. Mailing Address
1515 S. FEDERAL HWY. 1515 S. FEDERAL HWY. Suite, Apt. #, etc. Suite, Apt. #, etc DO NOT WRITE IN THIS SPACE City & State City & State BOCA RATON FL 4. FEI Number Applied For BOĆA RATON FL 651155286 Not Applicable Zip 33432 Country Country \$5.00 Additional 5. Certificate of Status Desired USA 33432 USA Fee Required 7. Name and Address of Current Registered Agent LUBA ZELDIS, ESQ. DO NOT WRITE Street Address (P.O. Box Number is Not Acceptable) IN THIS SPACE c/o Hair Club for Men, Ltd., Inc., 1515 S. Federal Hwy. City Boca Raton 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Signature, typed or printed name of registered agent and title if applicable DATE FEE IS \$50.00 200009177062 Make Check Payable to Department of State DUE BY MAY 1 9. MANAGING MEMBERS/MANAGERS TITLE Kae-Tech USA, Inc. **MGRM** NAME 1515 S. Federal Highway NAME STREET ADDRESS STREET ADDRESS Boca Raton FL 33432 CITY-ST-ZIP CITY ST ZIP TITLE TILLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS DO NOT WRITE CITY-ST-ZIP CITY-ST-ZIP TITLE IN THIS SPACE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 11. 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 report is true and accurate and that my signature shalf have the same legal effect as if made under path; 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.

AMENDED TO CORRECT 4/30/02 UBR FILING LISTING WRONG

Leslie E. Martin, Pres. of Member

11/18/02

Daytime Phone #

SIGNATURE: ______ OF PRINTED NAME OF BIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE