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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

NAME

STREET ADDRESS

M46428

(2)

**FONTANA HAIR COMPANY** 

FILED									
Apr 02	1998	8:00am							
Secret	ary o	f State							

Principal Place of Business Mailing Address			. 1691-0011 111 61818 81111 81818 11881 1311 61611	. =:=:: 9:5:: 4:5:: 4:4:: E:E:: (8.5)				
712 RIVER			3125 NW 48 CT.					
US CORAL SP	RINGS FL 33071-7314		apt. 124 Lighthouse point f	1 99071	.7214		DO NOT WRITE IN THE	S SPACE
03			US	L 000/11	1.1014		3. Date Incorporated or Qualified	
							02/11/1987	
2. Principal P	Place of Business	20.	Mailing Address				4. FEI Number	Applied For
21		26					59-2780301	Not Applicable
Suite, Apt.	#, etc.	ļ.,	Suite, Apt. #, etc.				5. Certificate of Status Desired	\$8.75 Additional
22		27					C. Commodia di Ciardo Edurido	Fee Required
City & Stat	e	<b>├</b>	City & State				6. Election Campaign Financing	\$5.00 May Be
Zip	Country	28	Zıp		ountry		Trust Fund Contribution	Added to Fees
24	25	29	7.141	30	ountry		This corporation owes or has paid the corporation owes.      Personal Property Tax due June 30.	current year Intangible
[24]	9 Name and Address of Curren		ered Agent	30	<del></del>		10. Name and Address of New Registere	
	<del></del>	<b>-</b>			81	Name		
	FONTANA, DOMENICK 224 N.W. 94TH WAY				-	5		
	CORAL SPRINGS FL 33065				82	Street Addre	ess (P.O. Box Number is Not Acceptable)	
\	JOHAL OF HINGO I L 33003				83			<del></del>
					-	000		- Table 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1
					84	City	F	<del></del> .
11. Pursuant	to the provisions of Sections 607.050 registered agent, or both, in the State	2 and 60 of Florida	7.1508, Florida <b>Šta</b> tut a. Such change was :	es, the	above zed by	named corp	oration submits this statement for the purpose ion's board of directors. I hereby accept the a	of changing its registered
agent i a	im familiar with, and accept the obliga	ations of	Section 607.0505, Flo	orida Si	tatutes	3.	orre board of directors. Thereby decept the d	ppolitiment de registered
SIGNATURE								
40	Signature, typed or printed name of registered age OFFICERS AND		<del></del>			nt signature require	ed when reinslating) DATE ADDITIONIC/CLIANICES TO OFFICERS A	
12.	DP	J DINEC	DELETE	13	TITLE	<u>-</u> -	ADDITIONS/CHANGES TO OFFICERS A	Change Addition
NAME	FONTANA, DOMENICK				NAME			
STREET ADDRESS	224 N.W. 94 WAY					ADDRESS		
CHTY-SI-ZIP	CORAL SPRINGS FL			- 6	CITY-S	1		
TITLE	VD	<del></del>	DELETE		TITLE	1 211		Change Addition
NAME	FONTANA, JOSEPHINE			2.2	NAME			,
STREET ADDRESS	224 N.W. 94 WAY			2.3	STREET	ADDRESS		
CITY-ST-ZIP	CORAL SPRINGS FL				4 CHY-S			j
TITLE	8	************	DELETE		TITLE		1	Change Addition
NAME	FONTANA, DENISE A			3.2	NAME			
STREET ADDRESS	712 RIVERSIDE DR.			33	STREET	ADDRESS		
DITY-ST-ZIP	CORAL SPRINGS FL			3.4	CITY-S	31 - ZIP		
TITLE			☐ DELET <b>é</b>	4,1	TITLE			Change Addition
NAME				4. 2	2 NAME			
STREET ADDRESS				4.3	STREET	ADDRESS		
CITY-ST-ZIP				4.4	CITY-S	I - ZIP		
TITLE			DELETE	5.1	TITLE			☐ Change ☐ Addition
NAME				5.2	NAME			
STREET ADDRESS				5.3	STREET	ADDRESS		
CITY-ST-ZIP					CITY-S	T- 21P		
TITLE			DELETE	61	TITLE	1		Change Addition

14. Thereby cortify 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 atlachment with an address.

6.4 CITY-ST-ZIP

6.2 NAME 6.3 STREET ADDRESS

2/1-/02 95/1952 1100