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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # M52073

TRITON BEAUTY SALON, INC.

FILED Feb 09, 1999 8:00am **Secretary of State**

02-09-1999 90034 023 ***150.00



Principal Place	e of Business	Mailing Address						
2775 COLLINS	AVE #6	2775 COLLINS AVE., #6			·			
MIAMI BEACH I	FL 33140-4405	MIAMI BEACH FL 33140-44	105		DO NOT W	RITE IN THIS SPACE		
					3. Date Incorporated or Qualif			7
					05/13/1987			
2 6-2-2-10	Honor of Divisions	2a. Mailing Address			4. FEI Number		Applied For	┨.
	flace of Business	26			59-2819494	· .	lot Applicable	1
Suite, Apt.	# etc	Suite, Apt. #, etc.				_ \$8.75	Additional	- 3
_	#, 6 10.	27			5. Certifcate of Status Desired	1 1 4	Required	1
City & State	9	City & State			6. Election Campaign Financir	ng _ \$5.00	May Be	7
— ·		28			Trust Fund Contribution	- { (to Fee	1
Zip	Country	Zip	Cou	ntry	8. This corporation owes the o	urrent year Intangible	7	
24	25	29	30		Personal Property Tax.	☐Yes	No	
	9. Name and Address of Current				10. Name and Address of Ne	w Registered Agent	7	
•	The state of the s	} 		81 Name	•			
	AREZ, ALEIDA	•		82 Street Add	ress (P.O. Box Number is Not Acce	entable)		-
2775	5 COLLINS AVE:, #6			Street Add	1683 (F.O. DOX NUMBER IS NOT FROM	, p. 10. 10. 10. 10. 10. 10. 10. 10. 10. 10		
MIAI	MI BEACH FL 33140			83			1.	
				04 07		85 Zir	Code	-
				84 City		FL °° 2"	Code	
11. Pursuant	to the provisions of Sections 607.0502	and 607.1508, Florida Statu	es, the al	pove-named corp	poration submits this statement for	the purpose of changing i	ts registered	
office or r	to the provisions of Sections 607.0502 registered agent, or both, in the State of the familiar with, and accept the obligation	f Florida :Such change was a	iuthorized	by the corporati	on's board of directors. I hereby ac	cept the appointment as t	registered	
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable (NOT)	: Panietarad	Agent signature require	ed when reinstating)	DATE		_
	Signature, typed or printed name or registered agent	and the nappakaole. (401)	regisiolou	Adelit adiamic redout	an whom to thotomas) i			
12	OFFICERS AND	DIRECTORS	13.		ADDITIONS/CHANGES TO	OFFICERS AND DIRECT	OR\$ IN 12	7 8
12.	OFFICERS AND	DIRECTORS DELETE	13 .	TLE .		OFFICERS AND DIRECT		11/08
TITLE	PD		_		ADDITIONS/CHANGES TO			- E
TITLE NAME	PD Alvarez, Aleida		1.1 TII 1.2 NA					- E
TITLE NAME STREET ADDRESS	PD ALVAREZ, ALEIDA 9164 FROUDE AVE	☐ DELETE	1.1 TII 1.2 NA 1.3 ST	ME REET ADORESS				- E
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD Alvarez, Aleida	☐ DELETE	1.1 TII 1.2 NA 1.3 ST	ME REET ADORESS TY-ST-ZIP			Addition	E 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5
NAME STREET ADDRESS CITY-ST-ZIP	PD ALVAREZ, ALEIDA 9164 FROUDE AVE	□ DELETE	1.1 TII 1.2 NA 1.3 ST 1.4 CI	ME REET ADDRESS IY-ST-ZIP TLE		☐ Change	Addition	E 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	PD ALVAREZ, ALEIDA 9164 FROUDE AVE	□ DELETE	1.1 TII 1.2 NA 1.3 ST 1.4 CC 2.1 TII 2.2 NA	ME REET ADORESS IY-ST-ZIP ILE ME		☐ Change	Addition	E 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5
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TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	PD ALVAREZ, ALEIDA 9164 FROUDE AVE	DELETE	1.1 TIT 1.2 NA 1.3 ST 1.4 CF 2.1 TIT 2.2 NA 2.3 ST 2.4 CF	ME REET ADDRESS ITY-ST-ZIP TLE MME REET ADDRESS ITY-ST-ZIP TLE		☐ Change	Addition	CR0E034'(41
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME NAME	PD ALVAREZ, ALEIDA 9164 FROUDE AVE	DELETE	1.1 TII 1.2 NA 1.3 ST 1.4 CC 2.1 TII 2.2 NA 2.3 ST 2.4 CC 3.3 TT 3.2 NA	ME REET ADDRESS ITY-ST-ZIP TLE ME REET ADDRESS ITY-ST-ZIP LE ME		☐ Change	Addition	CR0E034'(41
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TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	PD ALVAREZ, ALEIDA 9164 FROUDE AVE	DELETE DELETE	1.1 TII 1.2 NA 1.3 ST 1.4 CI 2.1 TII 2.2 NA 2.3 ST 2.4 CI 3.1 TI 3.2 NA 3.3 ST 3.4 CI	ME REET ADDRESS TY-ST-ZIP TLE MME REET ADDRESS TY-ST-ZIP TLE MME REET ADDRESS TY-ST-ZIP TLE MME REET ADDRESS		☐ Change	Addition Addition	CR2F03476
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME NAME NAME	PD ALVAREZ, ALEIDA 9164 FROUDE AVE MIAMI BEACH SURFSIDE FL 33	DELETE DELETE	1.1 TII 1.2 N 1.3 ST 1.4 CF 2.1 TII 2.2 N 2.3 ST 2.4 CF 3.1 TI 3.2 N 3.3 ST 3.4 CF 4.1 TI 4.2 N	ME REET ADDRESS TY-ST-ZIP LE AME		☐ Change	Addition Addition	CBOEU347(41
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD ALVAREZ, ALEIDA 9164 FROUDE AVE MIAMI BEACH SURFSIDE FL 33	DELETE DELETE	1.1 TII 1.2 NA 1.3 ST 1.4 CC 2.1 TII 2.2 NA 2.3 ST 2.4 CC 3.1 TT 3.2 NA 3.3 ST 3.4 CC 4.1 TI 4.2 N 4.3 ST 4.4 CC	ME REET ADDRESS TY-ST-ZIP LE ME REET ADDRESS TTY-ST-ZIP LE ME REET ADDRESS TTY-ST-ZIP LE AME REET ADDRESS TTY-ST-ZIP LE REET ADDRESS		☐ Change	Addition Addition Addition	CR2E0347(11
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	PD ALVAREZ, ALEIDA 9164 FROUDE AVE MIAMI BEACH SURFSIDE FL 33	DELETE DELETE	1.1 TII 1.2 N 1.3 ST 1.4 CF 2.1 TII 2.2 N 2.3 ST 2.4 CF 3.3 TT 3.2 N 3.4 CF 4.1 TI 4.2 N 4.3 ST	ME REET ADDRESS TY-ST-ZIP TLE MME REET ADDRESS TY-ST-ZIP TLE MME REET ADDRESS TY-ST-ZIP TLE AME REET ADDRESS TY-ST-ZIP TLE REET ADDRESS	200223000 200223000 2002230000000000000	☐ Change	Addition Addition Addition	CB2E034(41
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME NAME	PD ALVAREZ, ALEIDA 9164 FROUDE AVE MIAMI BEACH SURFSIDE FL 33	DELETE DELETE	1.1 TII 1.2 N 1.3 ST 1.4 Cf 2.1 TII 2.2 N 2.3 ST 2.4 Cf 3.1 TT 3.2 N 3.4 ST 4.4 Cf 5.1 TT 5.2 N	ME REET ADDRESS TY-ST-ZIP TLE MME REET ADDRESS TY-ST-ZIP TLE MME REET ADDRESS TY-ST-ZIP TLE AME REET ADDRESS TY-ST-ZIP TLE REET ADDRESS		☐ Change	Addition Addition Addition	CB2E034(41
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	PD ALVAREZ, ALEIDA 9164 FROUDE AVE MIAMI BEACH SURFSIDE FL 33	DELETE DELETE	1.1 TII 1.2 N 1.3 ST 1.4 CC 2.1 TII 2.2 N 2.3 ST 2.4 CC 3.1 TT 3.2 N 4.1 TI 4.2 N 4.3 ST 4.4 CC 5.1 TT 5.2 N 5.3 ST	ME REET ADDRESS TY-ST-ZIP LE ME REET ADDRESS TY-ST-ZIP LE ME REET ADDRESS TY-ST-ZIP LE AME REET ADDRESS TY-ST-ZIP LE REET ADDRESS TY-ST-ZIP LE AME REET ADDRESS	ACTION OF THE PROPERTY OF THE	☐ Change	Addition Addition Addition	CB2E034(41
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD ALVAREZ, ALEIDA 9164 FROUDE AVE MIAMI BEACH SURFSIDE FL 33	DELETE DELETE DELETE	1.1 TII 1.2 N 1.3 ST 1.4 CC 2.1 TII 2.2 N 2.3 ST 2.4 CC 3.1 TT 3.2 N 4.1 TI 4.2 N 4.3 ST 4.4 CC 5.1 TT 5.2 N 5.3 ST	ME REET ADDRESS IY-ST-ZIP LE ME REET ADDRESS ITY-ST-ZIP LE ME REET ADDRESS ITY-ST-ZIP LE AME REET ADDRESS ITY-ST-ZIP LE AME REET ADDRESS ITY-ST-ZIP LE AME REET ADDRESS ITY-ST-ZIP REET ADDRESS ITY-ST-ZIP REET ADDRESS ITY-ST-ZIP REET ADDRESS ITY-ST-ZIP	200223000 200223000 2002230000000000000	☐ Change	Addition Addition Addition Addition Addition	C C C C C C C C C C C C C C C C C C C
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	PD ALVAREZ, ALEIDA 9164 FROUDE AVE MIAMI BEACH SURFSIDE FL 33	DELETE DELETE	1.1 TII 1.2 N 1.3 ST 1.4 CC 2.1 TII 2.2 N 2.3 ST 2.4 CC 3.1 TT 3.2 N 4.1 TI 4.2 N 4.3 ST 4.4 CC 5.1 TT 5.2 N 5.3 ST 5.4 CC	ME REET ADDRESS IY-ST-ZIP LE ME REET ADDRESS ITY-ST-ZIP LE ME REET ADDRESS ITY-ST-ZIP LE AME REET ADDRESS ITY-ST-ZIP LE AME REET ADDRESS IY-ST-ZIP LE ME REET ADDRESS IY-ST-ZIP REET ADDRESS IY-ST-ZIP	ACTION OF THE PROPERTY OF THE	☐ Change	Addition Addition Addition Addition Addition	C C C C C C C C C C C C C C C C C C C
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14. I hereby certify that the information supplied with this filling 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, with all other like empowered.