

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **M52775** (7)

1. Corporation Name

ELEGANT MEN'S CUT, INC.



Principal Place of Business

**C/O IBIS GONZALEZ
807 N.W. 37TH AVE
MIAMI FL 33125**

Mailing Address

**C/O IBIS GONZALEZ
807 N.W. 37TH AVE
MIAMI FL 33125**

3. Date Incorporated or Qualified 05/27/1987	3a. Date of Last Report 04/24/1995
4. FEI Number 65-0032763	Applied For Not Applicable
5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees	
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☒ Yes ☐ No	

2. Principal Place of Business	2a. Mailing Address
21. C/O JULIO FERNANDEZ State, Apt. #, etc. 22. 807 N.W. 37TH. AVE City & State 23. MIAMI FL 33125 Zip Country	26. C/O JULIO FERNANDEZ State, Apt. #, etc. 27. 807 N.W. 37TH. AVE City & State 28. MIAMI FL 33125 Zip Country

9. Name and Address of Current Registered Agent

**JULIO FERNANDEZ
807 NW 37TH AVENUE
MIAMI FL 33125**

10. Name and Address of New Registered Agent

81. Name
82. Street Address (P.O. Box Number is Not Acceptable)
83.
84. City
FL 85. Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1504, 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 of person performing filing (keep separate from this report)

Signature of Registered Agent (sign and record when registering)

(DATE)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	1.1 TITLE	☐ Change ☐ Addition
NAME	FERNANDEZ, JULIO	1.2 NAME	
STREET ADDRESS	807 NW 37TH AVENUE	1.3 STREET ADDRESS	
CITY, ST, ZIP	MIAMI FL	1.4 CITY, ST, ZIP	
TITLE	D	2.1 TITLE	☐ Change ☐ Addition
NAME	FERNANDEZ, MIGDALIA	2.2 NAME	
STREET ADDRESS	807 NW 37TH AVENUE	2.3 STREET ADDRESS	
CITY, ST, ZIP	MIAMI FL	2.4 CITY, ST, ZIP	
TITLE		3.1 TITLE	☐ Change ☐ Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY, ST, ZIP		3.4 CITY, ST, ZIP	
TITLE		4.1 TITLE	☐ Change ☐ Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY, ST, ZIP		4.4 CITY, ST, ZIP	
TITLE		5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY, ST, ZIP		5.4 CITY, ST, ZIP	
TITLE		6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY, ST, ZIP		6.4 CITY, ST, ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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.

SIGNATURE:

Julio Fernandez

JULIO FERNANDEZ

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

305-642-3702

DATE

DATE OF FILING

CR2E034 (12/95)