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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # M72343

(0)

FILED
Jan 29 1997 8:00am
Secretary of State

GALLERY UNISEX BEAUTY SALON, INC.	

Principal Place of Business  17804 COLLINS AVE MIAMI BEACH FL 33160 US		Mailing Add	Mailing Address 17604 COLLINS AVE MIAMI BEACH FL 33160-2825 US			I SOCIOCIE IN 10010 11000 1111 BIBOD 1111 BIBIT BIBIT BIBIT BIBIT BIBIT BIBIT			
						<ol> <li>Date Incorporated or Qualified 03/10/1988</li> </ol>	03/10/1988 04/02/1996		
	lace of Business	2a. Mailing /	2a, Mailing Address			4. FEI Number Applied For			pplied For
21		26							lot Applicable
Suite, Apt.	#, etc.	Suite, Ap	Suito, Apt. #, etc.			5. Certificate of Status Desired		\$8.75	Additional
22		[27]						Fee R	lequired
City & Stat	e	h1	City & State			6. Election Campaign Financing	\$5.00 May Be		
23 Zin	Consti	[28]	·			Trust Fund Contribution	<u> </u>		to Fees
Zip	Country	Zip  :::1	_	— Country ≕า		8. This corporation has liability for			s. 199.032,
24	25 9. Name and Address of Curr	29	13	30			Yes 🗌		
4,41		om neglateteti Agi		81	Name	10. Name and Address of New Re	Rizieleo Võ	ent	
	YA, ANA M.			01	Name				
	174TH STREET			82	Street Add	fress (P.O. Box Number is Not Acceptab	ile)		
NUI	RTH MIAMI BEACH FL 33160			83					
				3					
				84	City		F a	<b>85</b> Zip	Code
44 Dominion	10 100 000 000 000	F 001 - 1 700 44 00 1		. <u></u>			FL		
office or r	to the provisions of Spotions 607.0 registered agent, or both, in the Sta	suz and 607, 1508, I ste of Florida. Such (	nionda Statutes Change was au	s, the above thorized by	a-named cor othe corpora	poration submits this statement for the pation's board of directors. I hereby accep	urpose of c of the appoi	nanging i nIment ar	its registered s registered
agent. I a	m familiar with, and accept the obl	ligations of, Section	607.0505. Flori	da Statuto	3		· · · · · · · · · · · · · · · · · · ·		9
SIGNATURE	<del></del>	**		<u>.                                    </u>					
12.	Signature typed or printed name of registered:  OFFICERS A	anion and the Lapposidoe	- 1FOM)	Registered Agr	nt signature requ	irod when revistaling) ADDITIONS/CHANGES TO OFFIC	DATE FOR AND C	VIDEOTO	DC IN 10
TITLE	P		DECEME	1.1 TIJL <del>{</del>		ADDITIONS/CHANGES TO OFFIC		Change	Addition
NAME	ESTENOZ, LUIS		_ beer it	1.2 NAME			L-	_ Change	L_ Adumon
STREET ADDRESS	301 174 ST. #2305				ADDRESS				
	N. MIAMI BEACH FL			1.3 STREET					
CITY-ST-ZIP TITLE	VPS	F	DECENE	1.4 CITY - S 2.1 TITLE	1-7P			Change	- Andrew
NAME	MAYA, ANA M.	L.		2.2 NAMI			L.	1 Change	☐ Addition
STREET ADDRESS	301 174 ST. #2305				ADDUTED				
	N. MIAMI BEACH FL			2.3 STHEET					
CITY-ST-ZIP TITLE	14 MINAUL PERCELLE		DELETE	2. 4 CHY-3 3.1 TPLI	01 - 71 <sup>2</sup>			Change	Addition
NAME		L		3.1 OPL1			L.	i change	Addition
STREET ADDRESS				3.2 NAME 3.3 STREET	ADDOLCO				
CITY-ST-ZIP									
TITLE		·	DELETE	3.4. CHY-5 4.1 Till E	01 - ZIF			Change	Addition
NAME		_		4.1 MILE 4.2 NAME			L.	7 cuantas	L. Addition
STREET ADDRESS				4.3 \$18601	Annerse				
CITY-ST-ZIP				4.4 OHY-S					
TITLE		···-	DELETE	51 THEF	1.44		- г	Change	Addition
NAME		<u></u>		5.2 NAME	1	<b>'</b>	<b>L</b>	, onange	ACOMON
STREET ADDRESS				5.3 STREET	Aboutee				
CITY-ST-ZIP									
TITLE			DELETE.	5.4 CHY-S 6.1 THLF	1 - 71):			Change	Addition.
NAME		L	. ا ۱۸۱۱ نــ				L	_ Change	Addition
				6.2 NAME	1000405				
STREET ADDRESS				6.3 STREET					
CiTY-ST-ZIP	ordify that the information and	nala iligi sana finika 14.		64 CITY-S	1-7)P				

14. I do 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 altachment with an address.

CICMATUDE.

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