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**PROFIT** CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # MR6616

(3)

| STYLE TREND HAIRCUTTERS, INC.  Principal Place of Business Mailing Address P.O. BOX 156 SUNNYSIDE FL 32461  SUNNYSIDE FL 32461-0156   |   |  |                                  |                                |  |  |  |   |            |                  |                             |                                     |
|---|---|--|----------------------------------|--------------------------------|--|--|--|---|------------|------------------|-----------------------------|-------------------------------------|
|   |   |  |                                  |                                |  |  |  | 3. Date Incorporated or Qua   | lified :   | Sa. Date         | of Last F                   | Report                              |
|   |   | # by   |                                  |                                |  | , <u>.</u>   |  | 06/23/1988  |            | 03/1             | 3/1996                      |                                     |
| ল '   | ace of Busines  | S  | <b>├</b> -₁                      | ailing Address                 |  |  |  | 4. FEI Number   |            |                  | )                           | oplied For                          |
| Suite: Apt a  | # 01/   | ····   | [26]                             | uite, Apt. #, etc.             | <del></del>  |  |  | 59-2900612  |            |                  |                             | ot Applicabl<br>Additional          |
|   | w, cic  |  | 27                               | uite, Apr. #, <del>u</del> te. |  |  |  | 5. Certificate of Status Desire   | ed [       | כ                |                             | Additional<br>equired               |
| Cily & State  | 5   |  | 28                               | ity & State                    |  |  |  | 6. Election Campaign Finance<br>Trust Fund Contribution   | ing [      | 7<br>7           |                             | May Be<br>to Fees                   |
| Zıp   |   | Country  | Z1                               | р                              | Cou  | intry  |  | 8. This corporation has liabili   |            |                  |                             |                                     |
| ]   | 25  |  | 29                               |                                | 30   |  |  | Florida Statutes  |            | es 🗌             |                             |                                     |
|   | 9. Name an  | d Address of Curr  | ent Register                     | ed Agent                       |  |  |  | 10. Name and Address of No  | ew Regis   | tered Ag         | ent                         |                                     |
|   | DANIELS, JAN  |  |                                  |                                |  | 81 1   | Name   |   |            |                  |                             |                                     |
|   | W. PARK PL  |  |                                  |                                |  | <b>B2</b> S  | Street Addi  | ress (P.O. Box Number is Not Acc  | ceptable)  |                  |                             |                                     |
| PAN   | iama city bi  | EACH FL 32413  |                                  |                                |  |  |  |   |            |                  |                             |                                     |
|   |   |  |                                  |                                |  | 83   |  |   |            |                  |                             |                                     |
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| Once of N   | ogia.o eo agen  | and accept the ob-   | ite of Florida<br>ligations of C | Such change was                | as authorized  | d by th  | ne corpora   | tion's board of directors. I hereby   | accept tr  | re appoi         |                             |                                     |
| IGNATURE  |   | ented name of registered a   | ugent and facilities             | opticable (                    | NOTE: Registered   |  |  | coration submits this slatement for<br>tion's board of directors. I hereby<br>red when reinstating)  ADDITIONS/CHANGES TO |            | DATE             |                             |                                     |
| GNATURE<br>2.   |   | ented name of registered a   |                                  | opticable (                    |  | d Agent s  |  |   |            | DATE<br>IS AND D |                             |                                     |
| GNATURE<br>2.   | Signature itypi a or r  | orded name of registered a   | ugent and facilities             | opticable (                    | NOTE: Registered   | d Agents   |  | red when reinstating)   |            | DATE<br>IS AND D | IRECTO                      | RS IN 12                            |
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Il James & M. Daniels

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Secretary of State