

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

CORPORATION
ANNUAL REPORT
1995



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

DOCUMENT # M91894 (9)

PANACHE HAIR DESIGNS, INC.

**APPROVED
AND
FILED**

95 MAY -1 PM 3:21

**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

Principal Place of Business: **% D. MERCEDES BENDER
1633 NORTH BAYSHORE DRIVE
MIAMI FL 33132**
Mailing Address: **% D. MERCEDES BENDER
1633 NORTH BAYSHORE DRIVE
MIAMI FL 33132**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 08/01/1988	3a. Date of Last Report 05/01/1994
4. Fil Number 65-0064705	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 out-of-state fees under S. 1004.03? Florida Statutes ☒ Yes ☐ No	

2. Principal Place of Business 21. State Apt # etc. 22. City & State 23. Zip 24. Country	2a. Mailing Address 25. State Apt # etc. 26. City & State 27. Zip 28. Country
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9. Name and Address of Current Registered Agent
**BENDER, D. MERCEDES
1633 NORTH BAYSHORE DR
MIAMI FL 33132**

10. Name and Address of New Registered Agent
81. Name
82. Street Address (P.O. Box Number is Not Acceptable)
83.
84. City
85. Zip Code
FL

11. Pursuant to the provisions of Sections 607.0507 and 607.1508 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 Agent or Director (If agent, print name and address)

Signature of Agent or Director (If agent, print name and address)

Signature of Agent or Director (If agent, print name and address)

12. OFFICERS AND DIRECTORS		13. ADDITIONS, CHANGES TO OFFICERS AND DIRECTORS IN 12	
12.1 NAME DPT BENDER, D. MERCEDES STREET ADDRESS 1633 N BAYSHORE DR CITY & STATE MIAMI FL		13.1 NAME 13.2 NAME 13.3 STREET ADDRESS 13.4 CITY & STATE	☐ Change ☐ Addition
12.2 NAME DVS BENDER, DAVID D. STREET ADDRESS 1633 N BAYSHORE DR CITY & STATE MIAMI FL		13.5 NAME 13.6 NAME 13.7 STREET ADDRESS 13.8 CITY & STATE	☐ Change ☐ Addition
12.3 NAME STREET ADDRESS CITY & STATE		13.9 NAME 13.10 NAME 13.11 STREET ADDRESS 13.12 CITY & STATE	☐ Change ☐ Addition
12.4 NAME STREET ADDRESS CITY & STATE		13.13 NAME 13.14 NAME 13.15 STREET ADDRESS 13.16 CITY & STATE	☐ Change ☐ Addition
12.5 NAME STREET ADDRESS CITY & STATE		13.17 NAME 13.18 NAME 13.19 STREET ADDRESS 13.20 CITY & STATE	☐ Change ☐ Addition

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 135.07(2)(b), Florida Statutes. I further certify that the information included 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 make this report as required by Chapter 147, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or as an attachment with an addition.

SIGNATURE: *D Mercedes Bender*
D MERCEDES BENDER
president

4-30-95 305-374-2307