

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

CORPORATION

ARTICLE OF INCORPORATION

1995



FLORIDA DEPARTMENT OF STATE

Secretary of State

Secretary of State

1995

APPROVED,
AND
FILED

07/31/1995 10:15

DOCUMENT # P39886

(7)

AWA TRAFFIC SYSTEMS AMERICA, INC.

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2127 UNIVERSITY PARK DRIVE, SUITE 300
OKEMOS MI 48864-3975

2127 UNIVERSITY PARK DRIVE, SUITE 300
OKEMOS MI 48864-3975

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9. Name and Address of Current Registered Agent

PRENTICE-HALL CORPORATION SYSTEM, INC.
1201 HAYES ST
STE 105
TALLAHASSEE FL 32301

3. Date of Filing 07/31/1992
3a. Date of Filing 08/17/1994
4. Filing Number 38-3023590
5. Filing Fee \$8.75 Additional Fee Required
6. Election Campaign Financing \$5.00 May Be Added to Fees
7. Trust Fund Contribution
8. The corporation has liability for the payment of the filing fee.
10. Name and Address of New Registered Agent

81. Name
82. Street Address
83.
84.
85. FL

11. The corporation has liability for the payment of the filing fee.

12. D
GROSS, NEIL
23 GEORGE ST, HOMEBUSH
NEW SOUTH WALES, AUS
P
CAYLOR, MICHAEL D.
2127 UNIVERSITY PK DR.
OKEMOS MI
S
SOKOL, ALBERT
101 FEDERAL ST.
BOSTON MA
T
CRISP, STEVEN
23 GEORGE ST.
NEW SOUTH WALES, AUS
Vice President
Raymond Miner
2127 University Pk. Dr. #300
Okemos MI 48864

Same
add

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1995
5 Talavera Rd.
North Ryde NSW
Australia 2113
Peter Evans - Treasurer
5 Talavera Rd.
North Ryde, NSW Australia 2113

14. The corporation has liability for the payment of the filing fee.

SIGNATURE: Michael Caylor 5/16/95 517 345-6300

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

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Mathison
Secretary of State
Division of Corporations

APPROVED
5-17-95

MAY 17 1995

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P39953** (5)

1. Name of Corporation

HAIR ASSOCIATES, INC.

2. Principal Place of Business

**400 S. DIXIE HWY.
HALLANDALE FL 33009**

3. Mailing Address

**400 S. DIXIE HWY.
HALLANDALE FL 33009**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Chartered
07/20/1992

3b. Date of Last Report
06/16/1994

4. FID Number
59-2478955

Applied For
Not Applicable

5. Certificate of Status, Dues, etc.

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution

**\$5.00 May Be
Added to Fees**

8. Any Corporation Registered in the State of Florida
Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business

21

2a. Mailing Address

26

State, Apt. # etc.

22

State, Apt. # etc.

27

City & State

23

City & State

28

24

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9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**C T CORPORATION SYSTEM
C/O C T CORPORATION SYSTEM
1200 PINE ISLAND RD.
PLANTATION FL 33324**

81 Name

82 Street Address (P.O. Box Number, Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.02(2) and 607.15(8), Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent of record 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 duties of a registered agent as set forth in Florida Statutes.

SIGNATURE

Jules Borenstein

12. Any Registered Agent Registered in the State of Florida

5-17-95

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS

NAME

**CD
SMITH, EDWARD
11099 HELENA DR.
COOPER CITY FL**

1. NAME

☐ Change ☐ Addition

STREET ADDRESS

1. STREET ADDRESS

CITY, STATE

1. CITY, STATE

NAME

**DPS
BORENSTEIN, JULES
7111 W. CYPRESSHEAD DR.
PARKLAND FL**

2. NAME

☐ Change ☐ Addition

STREET ADDRESS

2. STREET ADDRESS

CITY, STATE

2. CITY, STATE

NAME

3. NAME

☐ Change ☐ Addition

STREET ADDRESS

3. STREET ADDRESS

CITY, STATE

3. CITY, STATE

NAME

4. NAME

☐ Change ☐ Addition

STREET ADDRESS

4. STREET ADDRESS

CITY, STATE

4. CITY, STATE

NAME

5. NAME

☐ Change ☐ Addition

STREET ADDRESS

5. STREET ADDRESS

CITY, STATE

5. CITY, STATE

NAME

6. NAME

☐ Change ☐ Addition

STREET ADDRESS

6. STREET ADDRESS

CITY, STATE

6. CITY, STATE

NAME

7. NAME

☐ Change ☐ Addition

STREET ADDRESS

7. STREET ADDRESS

CITY, STATE

7. CITY, STATE

NAME

8. NAME

☐ Change ☐ Addition

STREET ADDRESS

8. STREET ADDRESS

CITY, STATE

8. CITY, STATE

NAME

9. NAME

☐ Change ☐ Addition

STREET ADDRESS

9. STREET ADDRESS

CITY, STATE

9. CITY, STATE

NAME

10. NAME

☐ Change ☐ Addition

STREET ADDRESS

10. STREET ADDRESS

CITY, STATE

10. CITY, STATE

SIGNATURE:

Jules Borenstein

JULES BORENSTEIN

5-17-95

(307) 457-0050