## FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

Mailing Address

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business

CITY-ST-ZIP

SIGNATURE:



FLORIDA DEPARTMENT OF STATE

**FILED** 

Jan 31 1997 8:00am

Secretary of State

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9200006489 (8)

PROFESSIONAL SCHOOL OF ELECTROLYSIS OF SOUTH FLO

12780 W. DIXIE HIGHWAY NORTH MIAMI FL 33161		12760 W. DIXIE HIGHWAY NORTH MIAMI FL 33161-4806								
						3. Date Incorporated or Qualified 11/20/1992	3a. Dat 05/0			port
·	lace of Business	2a. Mailing Address				4. FEI Number		].		plied For
21	B - 6 -	[26]			·	65-0406809				l Applicable
Suite, Apt.	#, etc.	Suite, Apt #, etc.				5. Certificate of Status Desired				dditional quired
City & State	3	City & State				Election Campaign Financing     Trust Fund Contribution				May Be o Fees
<i>Ζ</i> ιρ	Country 25	Zip <b>29</b>	Country 30	/		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes \(\sime\) No				
24	9. Name and Address of Curre		1301			10. Name and Address of New Reg			<del></del>	<del>·</del>
nice	ONNELL, FRANCIS		81	Na	ame		•	7		
1276	30 W. DIXIE HIGHWAY		82 Street Addre			dress (P.O. Box Number is Not Acceptable)				
NOR	ith Miami FL 33161		83	<b> </b>						
			84	Cit	ity		FL	85	Zip (	Code
11. Pursuant	to the provisions of Sections 607.05	502 and 607.1508, Florida Statu	ites, the abov	e-nai	med corpor	ration submits this statement for the p	urpose of	chang	ging it	s registered
agent. La	m familiar with, and accept the obli	igations of, Section 607.0505. F	lorida Statute	s.	corporațio	113 Doding of directors, I horoby decop	n no appo		A IL GIS	ogistored
SIGNATURE	blig arun, typed or priored can clot redistined a	413	TE: Registered Ag			who rejectoring	DATE			
12.		IND DIRECTORS	13.	err. sig	Justola tadollad	ADDITIONS/CHANGES TO OFFIC		DIRE	CTOR	S IN 12
TITLE	PD	☐ DELETE	1.1 TITLE		.			Ch		Addition
NAME	O'CONNELL, FRANCIS		1.2 NAME							
STREET ADDRESS	12780 W. DIXIE HIGHWAY		1.3 STREE	T ADOR	RESS					
CITY - ST - ZIP	NORTH MIAMI FL 33161		1.4 CITY-5	ST-ZIP						
TITLE	STD	☐ OELETE	2.1 TITLE				ļ	Cr	ange	Addition
NAMé	O'CONNELL, DANIEL		2.2 NAME							
STREET ADDRESS	12760 W. DIXIE HIGHWAY	•	2.3 STREE							
CITY - ST - 7IP	11.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1		2. 4 CITY- 3.1 TITLE	ST-ZIF	P	· · · · · · · · · · · · · · · · · · ·		Cr	anne	Addition
NAME	SMITH, MARIE T	ottell	3.2 NAME			•	,		-5y	
STREET ADDRESS	12760 W. DIXIE HIGHWAY		3.3 STREE		RESS					
CITY - ST - 7IP	NORTH MIAMI FL 33181		3.4. CITY-							
1ITLE		☐ DELETE	4.1 TITLE	.c?"		<del></del>		C	iange	Addition
NAME			4. 2 NAME							
STREET ADDRESS			4.3 STREE	T ADDE	RESS					
CITY-ST-ZIP			4.4 CITY-1	ST-ZIP	p	······································				
TPLE		☐ DELETE	5.1 TITLE				l	CI	ange	Addition
NAME			5.2 NAME			•				
STREET ADDRESS			5.3 STREE							
CHY-S*-ZIP		DELETE	5.4 CITY-1	ST - ZIP	P			CI	2000	Addition
TITLE		☐ DELETE	6.1 TITLE				ı	U	en Kje	L.J AGGRON
NAME			6.2 NAME		200					
STREET ADDRESS	}		6.3 STREE	i addi	HESS					

6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing 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 attachment with an address.