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

Mailing Address
19104 W. DIXIE HWY.

MIAMI FL 33180-2640

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business

19104 W. DIXIE HWY. MIAMI FL 33160

SIGNATURE:



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

**FILED** 

Jan 22 1997 8:00am

Secretary of State

Date

Daylime Phone #

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P9200007234 (7)

THE CHANGING ROOM OF OJUS, INC.

3. Date Incorporated or Qualified 3a. Date of Last Report 11/24/1992 01/24/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 65-0372602 26 Not Applicable Suite, Apt. # leto Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Country Country 8. This corporation has liability for intangible tax under s. 199.032, 24 29 30 Yes No 25 Florida Statutes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name WILLIAM J. SEGAL, P.A. 1799 NE 164 ST Street Address (P.O. Box Number is Not Acceptable) N MIAMI BEACH FL 33162 83 84 City 11. Pursuant to the provisions of Sections 607.0502 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 Superfuse hypercompanied manual registered agent and tracif applicable (NOTE Registered Agent a gnature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. (96/6) DELETE THE 1.1 TITLE Change Addition GOLD, ANTHONY D NAME 1.2 NAME 1041 NE 88 ST STREET ADDRESS 1.3 STREET ADDRESS N MIAMI FL 33138 CHTY-S1-7 P 1.4 CITY-ST-ZIP D DELETE Change 1-116 Addition 21 TITLE **GOLD. CHRISTINE** NAME 22 NAME 1041 NE 88 ST STREET ADDRESS 2.3 STREET ADDRESS N MIAMI FL 33138 CITY - \$1 - 208 2 4 CITY-ST-ZIP DELETE Change TITLE 3 1 1/TLE Addition NAME 32 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-S1-20 3.4. CITY-ST-ZIP DELETE THE 41 HILE ☐ Change Addition NAME 4.2 NAME STREET ACIDRESS 4.3 STREET ADDRESS CITY-ST-7P 4.4 CITY-ST-ZIP THEF DELETE 5.1 TITLE Change ☐ Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CHY-\$1-20 5.4 CITY-ST-ZIP DELETE THE 6.1 TITLE Change Addition 6.2 NAME STREET ADDRESS **6.3 STREET ADDRESS** 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 are use 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 absorbment with an address.