

FILE NOW: FILING FEE AFTER MAY 1ST IS \$50.00

FILED
Feb 23 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Morton Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **P92000007234 (7)**

1. Corporation Name

THE CHANGING ROOM OF OJUS, INC.

Principal Place of Business

**19104 W. DIXIE HWY.
MIAMI FL 33160
US**

Mailing Address

**19104 W. DIXIE HWY.
MIAMI FL 33160
US**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

11/24/1992

4. FEI Number

65-0372602

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 owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

City

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**WILLIAM J. SEGAL, P.A.
1709 NE 164 ST
N MIAMI BEACH FL 33162**

1 Name

2 Street Address (P.O. Box Number is Not Acceptable)

3

4 City

FL

85

Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the ve-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 Stat.

SIGNATURE

Signature, typed or printed name of registered agent and then if applicable

(NOTE: Registered signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

1 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE **D** ☐ DELETE
NAME **GOLD, ANTHONY D**
STREET ADDRESS **1041 NE 88 ST**
CITY-ST-ZIP **N MIAMI FL 33138**

1E ☐ Change ☐ Addition
1ME
1REET ADDRESS
1Y-ST-ZIP

TITLE **D** ☐ DELETE
NAME **GOLD, CHRISTINE**
STREET ADDRESS **1041 NE 88 ST**
CITY-ST-ZIP **N MIAMI FL 33138**

1E ☐ Change ☐ Addition
1ME
1REET ADDRESS
1ITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

1E ☐ Change ☐ Addition
1ME
1REET ADDRESS
1ITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

1E ☐ Change ☐ Addition
1ME
1REET ADDRESS
1ITY-ST-ZIP

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1E ☐ Change ☐ Addition
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1REET ADDRESS
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NAME
STREET ADDRESS
CITY-ST-ZIP

1E ☐ Change ☐ Addition
1ME
1REET ADDRESS
1Y-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for 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 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 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

SIGNATURE:

Anthony D. Gold
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIR

FEB 14 '98
Date Daytime Phone #

CR2E034 (10/97)