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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P92000011499

SUPA VA	ALU HAIR CARE CENTERS,	INC.				
Principal Place	of Business	Mailing Address			- - I 190110491 (10 16110 1501) 00311 0011: 6011 0	BIOT (1885 11811 BIBIG 16110 (BI) 1881
6019 26TH ST W 6019 26TH ST W BRADENTON FL 34207				<i>.</i> •	DO NOT WRITE IN T 3. Date Incorporated or Qualifed	HIS SPACE
					12/11/1992	
Principal Place of Business 2a. Mailing Address					4. FEI Number	Applied For
21			-		65-0378312	Not Applicable
		Suite, Apt. #, etc.	, etc.			\$8.75 Additional
		City & State	ity & State		C. Fleeting Connecting Financing	<u>`-</u>
City & State		28			6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip 24	Country Zip 25 29 3		_ `	8. This corporation owes the current year Intangible Personal Property Tax. Yes No		☐ Yes ☐ No
Name and Address of Current Registered Agent				- : . · ·	10. Name and Address of New Registe	red Agent
011011 414N 01011400 F			81	Name	·	
SIMON, ALAN RICHARD E 2255 GLADES RD			82 Street Add		ess (P.O. Box Number is Not Acceptable)	
STE 226-A		•	83			
BOC	A RATON FL 33431		84	City		FL 85 Zip Code
office or re agent, I a	agistered agent, or both, in the State on familiar with, and accept the obligation familiar with a supplemental familiar with a	or Florida, Such change was autr tions of, Section 607.0505, Florid	la Statutes	the corporation	oration submits this statement for the purpos n's board of directors. I hereby accept the appropriate the purpose of the purpo	ppointment de logiciere
12.	OFFICERS AN		13.	it signature required	ADDITIONS/CHANGES TO OFFICERS	
TITLE	CD ·	☐ DELETE	1.1 TITLE			Change Addition
NAME	ROSS, HENRY H		1.2 NAME			
STREET ADDRESS	3234 NW 28 WAY		1.3 STREET	ADDRESS		
CITY-ST-ZIP	BOCA RATON FL 14		1.4 CITY-S	T-ZIP		
TITLE	PST □ DELETE 2.1 T		2.1 TITLE		•	Change Addition
NAME	ROSS, TOBY	· ·				
STREET ADDRESS			•	TADDRESS	*	
CITY-ST-ZIP	Delete		2.4 CITY-S 3.1 TITLE	ST-ZIP		☐ Change ☐ Addition
TITLE			3.2 NAME			
NAME	ROSS, DAVID 3234 NW 28TH WAY		1	T ADDRESS		
STREET ADDRESS CITY-ST-ZiP	BOCA RATON FL		3.4. CITY-S		•	
TITLE	DELETE		4.1 TITLE			☐ Change ☐ Addition
NAME			4. 2 NAME		•	
STREET ADDRESS			4.3 STREE	TADORESS		
CITY-ST-ZIP	44		4.4 CITY-S	T-ZIP		
TITLE			5.1 TITLE			☐ Change ☐ Addition
NAME			5.2 NAME		•	
STREET ADDRESS				TADDRESS		ļ
CITY-ST-ZIP	ranian i	☐ DELETE	5.4 CITY-S 6.1 TITLE	1- ZP		☐ Change ☐ Addition
mme · · ·		I I DELETE	_ U	1		

CITY-ST-ZIP 14. I 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 suppliemental 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, with all other like empowered.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

TITLE NAME

STREET ADDRESS

FILED Apr 14, 1999 8:00 am Secretary of State

04-14-1999 90020 022 ***150.00