

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

**FILED**  
**May 11 1998 8:00am**  
**Secretary of State**

PROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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**DOCUMENT # P93000051654 (0)**

1. Corporation Name  
**KELLEDGE ENTERPRISES, INC.**



Principal Place of Business <b>INTERNATIONAL HAIRSTYLING                  423 FIFTH AVENUE                  INDIANLANTIC FL 32903                  US</b>	Mailing Address <b>321 MYAKKA ST NE                  PALM BAY FL 32907</b>
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business <b>INTERNATIONAL HAIRSTYLING</b>		2a. Mailing Address <b>INTERNATIONAL HAIRSTYLING</b>		3. Date Incorporated or Qualified <b>07/23/1993</b>	
21. <b>318 BANYAN WAY</b>	Suite, Apt. #, etc.	26. <b>INTERNATIONAL HAIRSTYLING</b>	Suite, Apt. #, etc.	4. FEI Number <b>58-3201262</b>	Applied For <input checked="" type="checkbox"/> Not Applicable
22. <b>MELBOURNE BEACH, FL.</b>	City & State	27. <b>318 BANYAN WAY</b>	City & State	5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75 Additional Fee Required</b>
23. <b>32951</b>	Zip	28. <b>MELBOURNE BEACH, FL</b>	City & State	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	<b>\$5.00 May Be Added to Fees</b>
24. <b>BREVARD</b>	Country	29. <b>32951</b>	Zip	30. <b>BREVARD</b>	Country
9. Name and Address of Current Registered Agent <b>MITCHELL, BRUCE A                  1825 S RIVERVIEW DR                  MELBOURNE FL 32901</b>				10. Name and Address of New Registered Agent	

81. Name <b>T. MITCHEL BARLOW, JR.</b>	85. Zip Code <b>32951</b>
82. Street Address (P.O. Box Number is Not Acceptable) <b>123 FIFTH AVENUE</b>	
83. <b>INDIANLANTIC</b>	
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: *[Signature]* DATE: \_\_\_\_\_

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE <b>ST P</b>	<input type="checkbox"/> DELETE	1.1 TITLE <b>P</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME <b>KELLEY, JACQUELINE M.</b>		1.2 NAME <b>KELLEY, JACQUELINE M.</b>	
STREET ADDRESS <b>318 BANYAN WAY</b>		1.3 STREET ADDRESS <b>318 BANYAN WAY</b>	
CITY-ST-ZIP <b>MELBOURNE BEACH FL</b>		1.4 CITY-ST-ZIP <b>MELBOURNE BEACH, FL</b>	
TITLE <b>P</b>	<input checked="" type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME <b>HEDGE, NANCY</b>		2.2 NAME	
STREET ADDRESS <b>321 MYAKKA STREET, N.E.</b>		2.3 STREET ADDRESS	
CITY-ST-ZIP <b>PALM BAY FL</b>		2.4 CITY-ST-ZIP	
TITLE <b>ST</b>	<input type="checkbox"/> DELETE	3.1 TITLE <b>ST</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME <b>KELLEY, JAMES M.</b>		3.2 NAME <b>KELLEY, JAMES M.</b>	
STREET ADDRESS <b>318 BANYAN WAY</b>		3.3 STREET ADDRESS <b>318 BANYAN WAY</b>	
CITY-ST-ZIP <b>MELBOURNE BEACH FL</b>		3.4 CITY-ST-ZIP <b>MELBOURNE BEACH, FL</b>	
TITLE <b>D</b>	<input checked="" type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME <b>HEDGE, RONALD C.</b>		4.2 NAME	
STREET ADDRESS <b>321 MYAKKA STREET, N. E.</b>		4.3 STREET ADDRESS	
CITY-ST-ZIP <b>PALM BAY FL</b>		4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 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 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.

SIGNATURE: *[Signature]* **ST. JAMES M. KELLEY** H-29-98 407-727-6925

CP2E034 (10/97)