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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P93000069811 (6)

## FILED Mar 19 1997 8:00am Secretary of State

1. Corporation Name NAILS IN MY CORNER, INC.  Principal Place of Business Mailing Address 1602 CORDOVA RD 1602 CORDOVA RD FT LAUDERDALE FL 33316 FT LAUDERDALE FL 33316-2133								
					3. Date Incorporated or Qualified 10/07/1993	3a. Date 04/12		leport
2. Principal F	ace of Business 2a. Mailing Address				4. FEI Number			oplied For
21 Suite Ant	26				65-0439781			ot Applicable
Suite, Apt. #, etc. Suite			uno, esp. a. ere.		5. Certificate of Status Dosired	□ *	Fee Re	Additional equired
City & Sta	le	City & State		···	6. Election Campaign Financing		\$5.00	May Be
23	Country	28	Countr		Trust Fund Contribution			to Fees
Zip 24	Country 25	7ip [29]	Countr 30	у	8. This corporation has liability for Florida Statutes	inlangible tax ∐ Yes		. 199.032,
	9. Name and Address of Currer		1001		10. Name and Address of New Re			
FRANCEK, LAURA P 1602 CORDOVA RD FT LAUDERDALE FL 33316				81 Name  82 Street Address (P.O. Box Number is Not Acceptable)  83 Page 184 City Page 185				Code
11. Pursuant office or agent. I a SIGNATURE	to the provisions of Sections 607.050 registered agent, or both, in the State am familiar with, and accept the oblig	ations of, Section 607.0505, F	londa Statute	es.	ropration submits this statement for the patient's board of directors. I hereby acce	ourpose of ch pt the appoint	anging it ment as	s registered registered
12.		D DIRECTORS	13.		ADDITIONS/CHANGES TO OFFIC			
TITLE	PVST Francek, Laura P	[] DELETE	1.1 TIFLE			L_	) Change	Addition
NAME STREET ADDRESS	JANA CORROLLA DO		1.2 NAME	T ADDRESS				
CITY-ST-ZIP	FT LAUDERDALE FL 33316		14 CITY-	j				
TITLE	D	DETETE	2.1 TITLE				Change	Addition
NAME	FRANCEK, LAURA P							
STREET ADDRESS	1602 CORDOVA RD FT LAUDERDALE FL 33316			T ADDRESS				
CITY-ST-ZIP TITLE	I LAUDENDALE PL 30310	DECETE	2 4 CITY- 3.1 TITLE	S1-7IP		·····	Change	Addition
NAME			32 NAME				<b>o</b> -	
STREET ADDRESS			3.3 \$1818	T ADDRESS				
CITY-ST-ZIP	<u></u>		3.4. CITY	\$1-20°			<u> </u>	
TITLE		□ DELFTE	4.1 Till (			L	Change	Addition
NAME STREET ADDRESS			4, 2 NAME	T ADDRESS				
CITY-ST-ZIP			4.3 STREE					
TATLE		☐ DEFETE	5.1 THEF				Change	Addition
NAME			5.2 NAME					
STREET ADDRESS			5.3 STREE	1 ADDRESS				
CITY-ST-ZIP		——————————————————————————————————————	5.4 CHY-	S1-7II <sup>2</sup>		····	[ <u></u>	T-4 7
TITLE		DELETE	6.1 TITLE				] Change	Addition
NAME CYPECY ADDRESS			62 NAME	1 ADD-01-00				
STREET ADDRESS	1		1	I ADDRESS				
CITY-ST-ZIP	by partify that the intermedian curvales	d with this this does not sup	6401Y-		ed in Section 119.07(3)(i), Florida Statute	e I further oc	alifer Hone	46

4. 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 it made under eath; 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.

NONATURE.

3-12 67

05/ 2/00/00/