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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P93000087048 (3)

PRETTY WOMAN HAIR & NAIL DESIGNS INC.

Principal Pl	non at Rusiness	Mailing Address	· · · · · · · · · · · · · · · · · · ·			1811) 1881 5511 8184 1811 1821 1811 1884 18 11 181 2 18 11 181 1	
Principal Place of Business 7105 WEST 12TH AVENUE HIALEAH FL 33014 US			7105 WEST 12TH AVENUE HIALEAH FL 33014		DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified		
		·		· · · · · · · · · · · · · · · · · · ·	12/21/1993		
		2a. Mailing Address	ddress		4. FEI Number	Applied For	
21 26					65-0464001	Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State		City & State	⊢¬ ′		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip 24	Country 25	Zip 29	Count	try	This corporation owes or has paid the current Personal Property Tax due June 30.	rrent year Intangible	
9. Name and Address of Current Registered Agent					10, Name and Address of New Registered Agent		
ROQUE, LUCIA 9951 N.W. 128TH TERRACE HIALEAH GARDENS FL 33018				Street Add	dress (P.O. Box Number is Not Acceptable)	85 Zip Code	
office o agent.	or registered agent, or both, in the S I am familiar with, and accept the c	7.0502 and 607.1508, Florida Statut State of Florida, Such change was a obligations of, Section 607.0505, Fk	authorized	by the corpora	poration submits this statement for the purpose of ation's board of directors. I hereby accept the ap-	of changing its registered pointment as registered	
SIGNATURI	E Stgoelars, typed or printed name of register	red agent and title if applicable (NOT	E: Ringistered /	Agent signature requ	lired when reinstating) DATE		
12.	OFFICERS AND DIRECTORS		13.		ADDITIONS/CHANGES TO OFFICERS AN		
TITLE	PD	DELETE	1.1 TITL	E]		☐ Change ☐ Addition ☐	
NAME	ROQUE, LUCIA		1.2 NAM	le]		;	
STREET ADDRES				EET ADDRESS		ļį.	
CITY - ST- ZIP	HIALEAH GARDENS FL		1.4 CITY	-S1-ZIP	· · · · · · · · · · · · · · · · · · ·		
TITLE	VTD DELETE		2 1 TITU	E		Change Addition	
NAME	ROQUE, LUCIA		2.2 NAM	IE .		ļ	
The state of the s		2 3 STRE	EET ADDRESS				
CITY-ST-ZIP	HIALEAH GARDENS FL		2 4 CIT	Y · ST · ZIP			
TITLE		☐ DELETE	3.1 TITL	E		Change Addition	
NAME			3.2 NAM	IE .		1	

4. 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 synthemental annual report is true and accurate and that my signature shall have the same legal effect as if made under eath; that I am an officer or director of the corporation of 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 offunged or an an attachment with an address.

3.3 STREET ADDRESS

4.3 STREET ADDRESS

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

4.4 City-ST-ZIP

3 4. CITY - ST - ZIP

4.1 THLE

4. 2 NAME

5.1 Tift F

5.2 NAME

61 TITLE

6.2 NAME 6.3 STREET ADDRESS

SIGNATURE:

STREET ADDRESS CITY+ST-ZIP

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME

TITLE

NAME

P PRINTED NAME OF FIGHING OFFICER OR DIRECTOR

DELETE

DELETE

DELETE

4/11/98

35 819-1747

Change

Change

Addition

Addition

Addition

FILED

Apr 21 1998 8:00am

Secretary of State