

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra H. Knight
Secretary of State
Tallahassee, Florida 32399-0001

DOCUMENT # **P94000005112 (5)**

HAIR 2 U INC.

8071 NW 44TH CT
LAUDERHILL FL 33351

8071 NW 44TH CT
LAUDERHILL FL 33351

RECEIVED

MAY 24 1995

STATE
OFFICE, FLORIDA

FILED IN 1995-05-24

2. Filing Date: 01/21/1994		3a. Type of Report Requested: Annual Report	
21. Filing Method: Mailing Address		3b. Type of Report Requested: Annual Report	
22. Filing Date: 01/21/1994		4. Filing Fee: \$8.75 Additional Fee Required	
23. Filing Date: 01/21/1994		5. Certificate of Status (Required): \$5.00 May Be Added to Fees	
24. Filing Date: 01/21/1994		6. Election Campaign Financing: \$5.00 May Be Added to Fees	
25. Filing Date: 01/21/1994		7. This corporation has liability for outstanding loans under the Florida Statutes: No	
26. Filing Date: 01/21/1994		8. This corporation has liability for outstanding loans under the Florida Statutes: No	
27. Filing Date: 01/21/1994		9. This corporation has liability for outstanding loans under the Florida Statutes: No	
28. Filing Date: 01/21/1994		10. This corporation has liability for outstanding loans under the Florida Statutes: No	
29. Filing Date: 01/21/1994		11. This corporation has liability for outstanding loans under the Florida Statutes: No	
30. Filing Date: 01/21/1994		12. This corporation has liability for outstanding loans under the Florida Statutes: No	

9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	
GRAMMER, EDWIN L 3801 N UNIVERSITY DR SUITE 018 GAINESVILLE FL 33905		SUSAN SANTAVICCA 8071 N.W. 44th Ct LAUDERHILL, FL 33351	
81. Name: SUSAN SANTAVICCA		82. Street Address (If C) Box Number is Not Acceptable: 8071 N.W. 44th Ct	
83. City: LAUDERHILL		84. State: FL 85. Zip Code: 33351	

I, Susan Santavicca, being duly sworn, depose and say that the foregoing is a true and correct statement of the facts and circumstances of the above-captioned corporation and that the same is true and correct to the best of my knowledge and belief. Executed on this 4th day of May, 1995, at Tallahassee, Florida.

12. OFFICERS AND DIRECTORS		13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS, IF ANY	
1. NAME: D SANTAVICCA, SUSAN		1. NAME: [] Change [] Addition	
2. ADDRESS: 8071 NW 44TH CT		2. ADDRESS: [] Change [] Addition	
3. CITY: LAUDERHILL FL 33351		3. CITY: [] Change [] Addition	
4. NAME: [] Change [] Addition		4. NAME: [] Change [] Addition	
5. ADDRESS: [] Change [] Addition		5. ADDRESS: [] Change [] Addition	
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29. ADDRESS: [] Change [] Addition		29. ADDRESS: [] Change [] Addition	
30. CITY: [] Change [] Addition		30. CITY: [] Change [] Addition	

14. I, the undersigned, certify that the information supplied with this filing is substantially true and correct and that the same is true and correct to the best of my knowledge and belief. Executed on this 4th day of May, 1995, at Tallahassee, Florida.

SIGNATURE: Sue Santavicca
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
 SUE SANTAVICCA

4-8-95 1995-05-24