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BROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

| DOOLI | 1996 | DIVISION C | | | | |
|--|---|---|---|---|--|---|
| 1. Corporation | of red the | 00013630 (6 | 5) | | | |
| LAURA | A AND DINO'S SALON, IN | NC. | | | | |
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| Principal Place | | Mailing Address | | s endernant film shrint alanit diditif diditi | IL ABIEL ABIBT 11800 15118 R(I | DO HAKA EDKI IADA |
| 6332 N.W. 91 Ft. Lauderd | ith ave. Dale fl 33309 | 6332 NW 9TH AVE. Ft. Lauderdale fl | 33309 | | | |
| | | | | Date Incorporated or Qualified 02/15/1994 | 3a. Date of Last (| • |
| 2. Principal Plant 1 | Place of Business | 2a. Mailing Address 26 | | 4. FEI Number | | Applied For |
| Suite, Apt. | #, etc. | Suite, Apt. #, etc. | | 65-0473334 | _ \$8.7 | Not Applicable 5 Additional |
| Orty & State | 70 | 27 | | 5. Certificate of Status Desired | Fee | Required |
| 9 | .c | City & State | | Election Campaign Financing Trust Fund Contribution | | 00 May Be ed to Fees |
| Zip | Country 25 | Zip 29 | Country 30 | 8. This corporation has liability for Florida Statutes | intangible tax under s s X No | |
| | 9. Name and Address of Cur | rent Registered Agent | 81 Name | 10. Name and Address of New F | Registered Agent | |
| MUCILLI, | I, DINO | | | 000 | | |
| 6332 NW 9TH AVE. | | | 82 Street Add | Iress (P.O. Box Number is Not Acceptable) | | |
| FT. LAUI | IDERDALE FL 33309 | | 83 | | | |
| | | | 84 City | | ₽ ■ 85 Z | ip Code |
| | | | 1 1 ' | | | p 0000 |
| Pursuant to or registere | to the provisions of Sections 607.05 red agent, or both, in the State of Fi | 502 and 607.1508, Florida Statu lorida. Such change was authori | tes, the above named corpo | pration submits this statement for the pur | rpose of changing its | • |
| Pursuant to registere familiar with the second | to the provisions of Sections 607.05 red agent, or both, in the State of Fi ith, and accept the obligations of, Se | 502 and 607.1508, Florida Statu orida. Such change was authori ection 607.0505, Florida Statute | tes, the above-named corporation's boass. | oration submits this statement for the pur ard of directors. I hereby accept the app | rpose of changing its pointment as registered | • |
| IGNATURE _ | Signature, typed or printed name of registered ag | gent and title if applicable (N | tes, the above named corpo zed by the corporation's boa S. | | Irpose of changing its pointment as registered | • |
| IGNATURE _ | Signature, typed or printed name of registered as | gent and title if applicable (N AND DIRECTORS | O'E: Registered Agent signature require | | rpose of changing its pointment as registered bate CICERS AND DIRECTO | registered office 3 agent. I am DRS IN 12 |
| GNATURE _ | Signature, typed or printed name of registered as OFFICERS A | gent and title if applicable (N | O°E' Registered Agent signature require 13. 1.1 TITLE | ed when reinstating) | rpose of changing its pointment as registered DATE | registered office diagent. I am |
| IGNATURE | Signature, typed or pricted name of registered as OFFICERS A PT MUCILLI, LAURA | gent and title if applicable (N AND DIRECTORS | O°E: Rogistered Agent signature require 13. 1.1 TITLE 1.2 NAME | ed when reinstating) | rpose of changing its pointment as registered bate CICERS AND DIRECTO | registered office 3 agent. I am DRS IN 12 |
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SIGNATURE: SUNATURE AND TYPED ON PRINTED WATER OF SIGNING SPECEN OR DIRECTOR

4-16-96

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