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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P94000017787 (0)

JOLIE MAIN NAIL SALON, INC.

Principal Place of Business

Mailing Address

FILED Apr 27 1998 8:00am Secretary of State



3376 NE 33 S FT. LAUDERD	STREET DALE FL 33308	3376 NE 33 STREET FT. LAUDERDALE FL 333	08	DO NOT WRITE IN TUI	P PDACE
Change Alress To J				DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 03/02/1994	
2. Principal P	lace of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26 Angela, M.	Minichino'	65-0472774	Not Applicable
Suite, Apt.	#, etc.	Suite Apt. # etc. 27 3.830 N.E	Minichinot 53nd St	5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State 23		28 Fd- Course	dale fla	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip 24	Country 26	20 33308 20 33308	30 Saward	This corporation owes or has paid the c Personal Property Tax due June 30.	☐ Yes ☐ No
	9, Name and Address of Currer	nt Registered Agent	81 Name	10. Name and Address of New Registere	1 Agent
	NICHINO, ANGELA M	7	Name		
	76 NE 33 STREET . LAUDERDALE FL 33308	//	82 Street Addr	ress (P.O. Box Number is Not Acceptable)	-
			84 City		. 85 Zip Code
			1 1 '	F	
11. Pursuant office or ragent. La	to the provisions of Sections 607 050 registered agent, or both, in the State am familiar with, and accept the oblig	02 and 607.1508, Florida Statut of Florida. Such change was a lations of, Section 607.0505, Flo	es, the above-named corp authorized by the corporat orida Statutes.	poration submits this statement for the purpose tion's board of directors. I hereby accept the a	of changing its registered ppointment as registered
SIGNATURE					
	Signature, typed or printed name of registered age		E Registered Agent signature requir		
12.	OFFICERS AN	D DIRECTORS DELETE	13.	ADDITIONS/CHANGES TO OFFICERS A	Change Addition
TITLE	•	☐ DELETE	1.1 TITLE		C Criange C Addition
NAME	MINICHINO, ANGELA M		1.2 NAME		
STREET ADDRESS	3376 NE 33 STREET		1.3 STREET ADDRESS		
CITY-ST-ZIP	FT. LAUDERDALE FL 33308		1.4 CITY-ST-ZIP		[] A
TITLE		☐ DELETE	2.1 TITLE		Change Addition
NAME			2.2 NAME		
STREET ADDRESS	{		2.3 STREET ADDRESS		
CITY-ST-ZIP			2. 4 CITY-ST-ZIP		
TITLE]	☐ DELETE	3.1 TITLE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY - ST - ZIP]		3.4. CITY-ST-ZIP		
TITLE]	☐ DELETE	4.1 TITLE		Change Addition
NAME			4. 2 NAME		
NAME	1		4.3 STREET ADDRESS		
STREET ADDRESS			1.0 0 1110011100		
			4.4 CITY-ST-ZIP		
STREET ADDRESS		☐ DELETE			Change Addition
STREET ADDRESS CITY-ST-ZIP		☐ DELETE	4.4 CITY-ST-ZIP		Change Addition
STREET ADDRESS CITY - ST - ZIP TITLE		☐ DELETE	4.4 CITY-ST-ZIP 5.1 TITLE	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Change Addition
STREET ADDRESS CITY-ST-2IP TITLE NAME		☐ DELETE	4.4 City-St-ZiP 5.1 Title 5.2 NAME		Change Addition
STREET ADDRESS CITY-ST-2IP TITLE NAME STREET ADDRESS		☐ DELETE	4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS		Change Addition
STREET ADDRESS CITY - ST - ZIP TITLE NAME STREET ADDRESS CITY - ST - ZIP	-		4.4 City-St-ZiP 5.1 Title 5.2 NAME 5.3 STREET ADDRESS 5.4 City-St-ZiP		
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME			4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 6.1 TITLE		
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	-		4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 6.1 TITLE 6.2 NAME		

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 changod; or on an attachment with an address.

GNATURE: