PROFIT CORPORATION NUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

CUMENT # P94000017992 (6)

LARRY'S BARBER, INC.

Princip I Place of Business 437 W. SILVERSTAR RD. OCOEE FL 34761

Mailing Address

437 W. SILVERSTAR RD. OCOEE FL 34761

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

FILED Jan 26 1998 8:00am Secretary of State

							03/04/1994				
2. Principal Place of Business			2a. Mailing Address				4. FEI Number	Applied For			
21		26	26				59-3237148	No	ot Applicable		
Suite, Apt. #, etc.			Suite, Apt. #, etc.				5. Certificate of Status Desired		Additional		
22			27			······	0. 05.1110415 0. 5.11105 0.50100	Fee Re	equired		
City & State			City & State				Election Campaign Financing	\$5.00	May Be		
23			28				Trust Fund Contribution				
Zip	Country		Zip Cour				8. This corporation owes or has paid the current year Intangible				
24	25 29 30					Personal Property Tax due June 30. ✓ Yes No					
9. Name and Address of Current Registered Agent						Name	10. Name and Address of New Registered A	gent			
HERRINGTON, LARRY J					81	Name					
	13 BLUE SPRINGS CT					Street Addr	Street Address (P.O. Box Number is Not Acceptable)				
OCOEE FL 34761						3					
					84	City		85 Zlp i	Code		
							FL	1	i		
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered of the purpose of the purpose of changing its registered of the purpose of the purpose of changing its registered of the purpose of the purp											
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.											
SIGNATURE											
	Signature, typed or pantos rame of registered agen			E. Registere	d Ager	nt signature requir	red when reinstating) DATE				
12.	OFFICERS AND	DIREC		13.		. ,	ADDITIONS/CHANGES TO OFFICERS AND	_			
TITLE	PD		☐ DELETE	1.1 TI	TLE		i	Change	Addition		
NAME	HERRINGTON, LARRY J			1.2 N	AME						
STREET ADDRESS	1213 BLUE SPRINGS CT		1.3 S	1.3 STREET ADDRESS				li li			
CITY-ST-2IP	OCOEE FL 34761				TY-51	T-ZIP					
TITLE	VSD		☐ DELETE	2.1 TI	TLE		Ł	Change	Addition		
NAME	HERRINGTON, MARTHA J			2.2 NA							
STREET ADDPESS	1213 BLUE SPRINGS CT			2.3 \$1	REET A	ADDRESS					
CITY-ST-ZIP	OCOEE FL 34761			2.40	MY-S	T-ZIP	<u> </u>				
TITLE			☐ DELETE	3.1 TI	TLE		L	Change	Addition		
NAME				3.2 N	\ME						
STREET ADDRESS				3.3 S1	REET	ADDRESS			İ		
CITY - ST - ZIP				3.4. C	17Y-S	T-ZIP					
TITLE			☐ DELETE	4.1 TI	TLE			Change	Addition		
NAME				4, 2 N	AME						
STREET ADDRESS				4.3 ST	REET /	ADDRESS			Ì		
CITY-ST-ZIP				4.4 CI	TY-ST	r-zip					
TITLE	The state of the s		DELETE	5,1 TI	TLE			Change	Addition		
NAME				5.2 NA	ME				<u> </u>		
STREET ADDRESS				5.3 ST	REET /	ADDRESS					
CITY-ST-ZIP				5.4 CI	TY-ST	r-ZIP					
TITLE			DELETE	6.1 77				Change	Addition		
NAME				6.2 NA	ME						
STREET ADDRESS						ADDRESS					
CITY-ST-ZIP				6.4 CI		1					
14. I hereby c	ertify that the information supplied with	n this f	filing does not qualify fo	or the exe	mpti	ion stated in	Section 119.07(3)(i), Florida Statutes. I further cert	fy that the	information		
indicated	on this annual report or supplemental.	ELIGGE	IL FORCET IS TILLE SIND SOC	rizate and	i tha	it mir eignətir	re shall have the same legal effect as if made unde	ar nath+ the	riam an I		

or supplier remains a find report or supplier remains a find report is true and accurate and that my signature shall have the same legal effect as if made under oath; 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.

SIGNATURE:

407-656-8505