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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P94000025369 (7)

IMAGES HAIR DESIGNERS, INC.

## FILED Apr 02 1997 8:00am Secretary of State

Principa! Place 13820 LITTLE HUDSON FL 3 US		12	Mailing Address 285 HENRY AVENUE PRING HILL FL 34608-74	401							 
							3. Date Incorporated or Qualified 03/30/1994		ate of La 23/199	st Report	
2. Principal f	Place of Business	2a	. Mailing Address				4. FEI Number	1 00	100	Applied F	or
i]		26				ļ	59-3241751		<u> </u>	Not Appli	cable
Suite, Apt. #, etc			Suite, Apt. #, etc.				5. Certificate of Status Desired Security Fee Required				
City & Sta	ite		City & State				6. Election Campaign Financing	П		<b>00</b> May B	
<u>И</u>	Country	[28]	Zip Country				Trust Fund Contribution Added to Fees				
25				30			8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes				
1	9. Name and Address of Curr	29 rent Regis	stered Agent				10. Name and Address of New Re	glatered	Agent		
PAI	NEBIANCO, DOREEN				61	Name					
1285 HENRY AVENUE SPRING HILL FL 34608					82 Street Addr		sş (P.O. Box Number is Not Acceptable)				
					83						
				1	84	City	· · · · · · · · · · · · · · · · · · ·	FL	85	Zip Code	
SIGNATURE	Stignature: typed or profes name of registered OFF ICERS 7			13.		signature required	when reinstating) ADDITIONS/CHANGES TO OFFI	DATE CERS AND	DIREC Char		
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I do Refetby certify that the information supplied with this filing does not quality for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this agricula report or supplemental 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 or the receiver or trustee empowered to execute this report as fequired by Chapter 607. Florida Statutes; and that my name appears in Block 12 or Block 13 if changed or on an attaching twith an address.

CICNATIDE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/27/97 /8/3-861-762=