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CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS

1996

P94000035677 (1) **DOCUMENT #**

1. Corporation Name RAYMONDE BEAUTY SUPPLIES AND SALON, INC. Mailing Address Principal Place of Business 1030 NW 9TH AVE 1030 NW 9TH AVE FT LAUDERDALE FL 33311 FT LAUDERDALE FL 33311 3a. Date of Last Report 3. Date Incorporated or Qualified 03/24/1995 05/09/1994 Applied For 4. FEI Number 2a. Maling Address 2. Principal Place of Business Not Applicable 65-0491411 26 21 \$8.75 Additional 5. Certificate of Status Desired Suite, Apt. #, etc Suite, Apt. #, etc. Fee Required 27 22 \$5.00 May Be 6. Election Campaign Financing City & State City & State Added to Fees Trust Fund Contribution 28 23 8. This corporation has liability for intangible tax under s. 199.032, Country Zio Country Zip ☐ Yes ☐ No Florida Statutes 30 29 25 24 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name Street Address (P.O. Box Number is Not Acceptable) 82 JOSEPH, RAYMONDE 1030 NW 9TH AVE 83 FT LAUDERDALE FL 33311 85 Zip Code City 84 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. its registered office SIGNATURE (12/95)PROFE SEquillened Agent Signature. Signer instity and or printed have of regelered over than the diapplicate ADDITIONS CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12 Change ☐ Addition DELETE 1 1 TITLE PD TITLE CR2E034 1.2 NAME Joseph, Duval NAME 1.3 STREET ADORESS 4370 NW 32ND AVENUE STREET ADDRESS FT LAUDERDALE FL 33319 14 CITY - \$1 - 7-P Addit on CITY - S1 - ZIP Change DELETE 2.1 1111.6 ٧D TITLE 2.2 NAME JOSEPH, RAYMONDE NAME 2.3 STREET ADDRESS 4370 NW 32ND AVENUE STREET ADDRESS FT LAUDERDALE FL 33319 2.4 Cil Y 51-2iP Addition CITY - ST - ZIP ☐ Change DELETE 3 1 THUE TITLE NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4 CITY - ST-ZIP CITY-ST-7P Change Addition DELETE 4 1 TITLE TITLE NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CiTY - \$1 - ZiP Addition CITY-ST-ZIP ☐ Change DELETE 5 I TITLE TITLE 5 2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5 4 CITY - ST - ZIP CITY-ST-ZIP ☐ Change Addition DELETE 6.1300€ TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). Florida Statutes I further certify that the information indicated on this annual report or supplemental annual 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 description or the receiver or trustee empowered to execute this report as required by Chapter 607. Florida Statutes; and that my name appears in Plork 13 or Place 13 if shaped are not additionally that he address. 6 4 CITY - ST - ZIF

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR JOSEPH 5/1/96

nged, or on an attachment with an address.

13 if ch

appears in Block 12 or Blo

SIGNATURE: