

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION ANNUAL REPORT 1995		FLORIDA DEPARTMENT OF STATE Sandra B. Morham Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # <i>P94000045817</i>			
1. Corporation Name <i>Shear Excellence Unisex Hair & Nail Salon Inc</i>			
Principal Place of Business <i>233 Commercial Blvd.</i> <i>Lauderdale By The Sea FL 33308</i>		Mailing Address <i>SAME</i>	
2. Principal Place of Business 21		2a. Mailing Address 26	
22 Suite, Apt. #, etc.		27 Suite, Apt #, etc.	
23 City & State		28 City & State	
24 Zip		29 Zip	
25 Country		30 Country	
9. Name and Address of Current Registered Agent <i>Gray, Eleanor C</i> <i>233 Commercial Blvd.</i> <i>Lauderdale By The Sea, FL 33308</i>		10. Name and Address of New Registered Agent	
81 Name		82 Street Address (P.O. Box Number is Not Acceptable)	
83		84 City	
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 agent, 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 printed name of registered agent and title if applicable) (NOTE: Registered Agent signature required when reinstating)			
DATE			
12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<i>Director</i> <i>Gray, Eleanor C</i> <i>233 Commercial Blvd.</i> <i>Lauderdale By The Sea, FL 33308</i>	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<i>Director</i> <i>Vicki Godown</i> <i>1500 NE 32 CT</i> <i>Pompano Beach, FL 33064</i>	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<i>Director</i> <i>Joseph Gray</i> <i>2616 Curlew Street</i> <i> Ft. Meyers Beach, FL 33931</i>	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP	☐ Change ☐ Addition
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 110.07(3)(b), 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 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: <i>Eleanor C. Gray</i> <i>4/28/95</i>			
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			

FILED

95 MAY -1 AM 11:20

13500 1st FL Bldg. A

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified <i>06/10/94</i>		3a. Date of Last Report	
4. FEI Number <i>05-0508240</i>		Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
6. Election Campaign Financing ☐		\$5.00 May Be Added to Fees	
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☒ No			

100001478771
 05/06/95 11044 015
 ***200.00 Zip Code ***200.00
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