FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00 **PROFIT** FLORIDA DEPARTMENT OF STATE **FILED** CORPORATION Sandra B. Mortham ANNUAL REPORT May 01 1997 8:00 am Secretary of State DIVISION OF CORPORATIONS 1997 Secretary of State P94000053062 DOCUMENT # Hollywood Nail Company Mailing Address Principal Place of Business 1155W ST Rd 434 1155 W. STATE Rd 434 SUITE 111 SUITE 111 LONGWOOD, FZ 32750 LONG WOOD, FL 32750 3. Date incorporated or Qualified 3a. Date of Last Report 7/13/94 2. Principal Place of Business 2a. Mailing Address Applied For 59-3256 26 Not Applicable Suite Apt # etc Suite Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Country Country 8. This corporation has liability for intangible tax under s. 199.032, Yes No 24 29 30 Florida Statutes 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent B1 Name LUL, VAN T 82 Street Address (P.O. Box Number is Not Acceptable) 1155 WISTATE Rd 434 SUITE III 83 84 City Zip Code LONG WOOD, 85 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, 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 (NOTE Registered Agent a gnature required when reinstating) OFFICERS AND DIRECTORS 12. 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE 1.1 TITLE Change Addition THE LULI, VAN 1155 W. STATE Rd 434 STEIL DAMS 12 NAME CR2E034 STREET ADDRESS 13 STREET ADDRESS ONG WOOd 14 CiTY - \$1 - ZIP Addition 2 1 TITLE Change Dist 2.2 NAME 2.3 STREET ADDRESS 2 4 CITY-ST-ZIP E-17 - ST - 765 LONGWOOD FL, 327 3 1 TITLE Change Addition TIFUE NAME 3.2 NAME STREET MICHESS 3.3 STREET ADDRESS 3.4. City - ST-ZIP THY St 7: DELETE 4.1 TITLE Change Addition 4. 2 NAME MAM: 4.3 STREET ADDRESS STREET AND INC. 4 4 CITY - ST - ZIP 1917 ST 791 DELETE 5.1 TITLE Change Addition 111.3 NV 5.2 NAME

14. Los fereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. Flurther certify that the information report or supplemental annual report africe and that my signature shall have the same legal effect as if made under oath; that have 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 8 pck 12 or 8 ock 13 if changed, or on an attachment with an address.

61 TiTLE

62 NAME

5.3 STREET ADDRESS 5.4 City-St-Zip

6.3 STREET ADDRESS

64 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

0.17 St 26

SDEEL ADD

1015

MSSA

SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DELETE

4/27/97

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Daytma Phone #

Addition