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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9400062060

1. Corporation Name

Principal Place of Business	Mailing Address				
1037-B NW THIRD STREET HALLANDALE FL 33009	1037-B NW THIRD STREET HALLANDALE FL 33009				
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2. Principal Place of Business	2a. Mailing Address				
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21 AS ABOVE Suite, Apt. #, etc.	26 Suite, Apt. #, etc.				
21 AS ABOVE Suite, Apt. #, etc. 22	26 Suite, Apt. #, etc.				
21 AS ABOVE Suite, Apt. #, etc.	26 Suite, Apt. #, etc.				

Apr 22, 1999 8:00 am Secretary of State

04-22-1999 90142 046 ***150.00

Principal Place of Business Mailing Address 1037-B NW THIRD STREET HALLANDALE FL 33009 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed 08/23/1994 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For	GABLES	BEAUTY & BARBEH SUP	PLY, ING.							
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City & State City & State		#, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired			
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Zip	<u> </u>	•	— ´				1 - 11	•		
9. Name and Address of Current Registered Agent 9. Name and Address of Current Registered Agent 9. Name and Address of New Registered Agent 10. Name and Address of New Registered Agent 1111 LINCOLN ROAD SUITE 325 MIAMI BEACH FL 33139. 82 Street Address (P.O. Box Number is Not Acceptable) 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Findia Statutes, the above-manded corporation submits this statement for the purpose of changing its registered agent. I am familiar with; and accept the obligations of, Sections 607.0502, Findia Statutes, the above-manded corporation submits this statement for the purpose of changing its registered agent. I am familiar with; and accept the obligations of, Section 607.0505, Findia Statutes, the above-manded corporations board of directors. I hereby accept the appointment as registered agent. I am familiar with; and accept the obligations of, Section 607.0505, Findia Statutes, the above-manded corporations board of directors. I hereby accept the appointment as registered agent. I am familiar with; and accept the obligations of, Section 607.0505, Findia Statutes, the above-manded corporation submits this statement for the purpose of changing its registered agent. I am familiar with; and accept the obligations of, Section 607.0505, Findia Statutes, the above-manded corporation submits the statement for the purpose of changing its registered agent. I am familiar with; and accept the obligations of, Section 607.0505, Findia Statutes, the above-manded corporation submits this statement for the purpose of changing its registered agent. I am familiar with; and accept the obligations of, Section 607.0505, Findia Statutes, the above-manded corporation submits this statement for the purpose of changing its registered agent. I am familiar with; and accept the obligations of, Section 607.0505, Findia Statutes, the above-manded corporation submits the statement for the purpose of changing its registered agent. I am familiar with; and accept the apolic and accept the apolic a		Country		Cou	intry		a. This corporation owes the current year In	ntangible	^	
GOUDISS, MORTON R 1111 LINCOUN ROAD SUITE 325 MIAMI BEACH FL 33139. 44 City FL 85 Zip Code 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. I am familiar with, and accept the obligations of, Section 607.0502 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, the above-named corporation submits this statement for the purpose of changing its registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 12. OFFICERS AND DIRECTORS 13. SIREST ADDRESS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 12. OFFICERS AND DIRECTORS 13. SIREST ADDRESS 13. SIREST ADDRESS 1007-51.2P			— ·	30			1 **		ΣίΝο	
GOUDISS, MORTON R 1111 LINCOLN ROAD SUITE 325 MIAMI BEACH FL 33139. 4 City FL 85 Zip Code 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. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes, the above-named 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 OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 14. I TIME PERN, KENNETH 1037-B NW 3RD ST 13. STREET ADDRESS CITY-ST-2P HALLANDALE FL 33009 14. CITY-ST-2P 14. CITY-ST-2P 15. TIME DELETE 21. TIME DELETE 21. TIME DELETE 21. TIME DELETE 31. TIME DELETE 32. TIME DELETE 33. TIME DELETE 34. CITY-ST-2P DELETE 35. TIME DELETE 35			ent Registered Agent				10. Name and Address of New Registered	d Agent		
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SUITE 325 MIAMI BEACH FL 33139. 84 City FL 85 Zip Code 11. Pursuant to the provisions of Sections 607.0502 and 607.1506. 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, and accept the obligations of, Section 607.0505, Florida Statutas. SIGNATURE SIGNATURE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE P DELETE 11. TITLE P DELETE 11. TITLE P DELETE 11. TITLE P DELETE 12. TITLE DELETE 12. TITLE DELETE 12. TITLE DELETE 13. TITLE DELETE 12. TITLE DELETE 13. TITLE DELETE 14. TITLE DELETE 14. TITLE DELETE 14. TITLE DELETE 14. TITLE DELETE 15. TI					82	Street Addr	ess (P.O. Box Number is Not Acceptable)			
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### City ### Control of 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. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. ### Signature, Typed or printed name of registered agent and title if applicable. ### City ### Comparison of Sections 607.0502 and 607.1508, Florida Statutes. The above-named corporation submits this statement for the purpose of changing its registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. #### Signature, Typed or printed name of registered agent and title if applicable. #### Comparison of Sections 607.0502 and 607.1508, Florida Statutes. The above-named corporations board of directors. I hereby accept the application agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. ##### Signature, Typed or printed name of registered agent and title if applicable. #### Comparison of Change of Cha					83					
### 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 office or registered agent and size if a spiciosion. SIGNATURE	MIAN	WI BEACH FL 33139.			94	City		85 Z	in Code	
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14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 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, with all other like empowered. _CITY-ST-ZIP

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR