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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT O

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P94000085396 (7)

EUROPEAN HAIR TRENDS, INC.

FILED Jan 29 1998 8:00am Secretary of State

Principal Place of Business Mailing Address					-{ 	7121 10101 01101 11110 12110 1111 1001	
866 DIXON BLVD. 866 DIXON BLVD.							
COCOA FL 32922 COCOA FL 32922					DO NOT WRITE IN THIS SPACE		
					3. Date Incorporated or Qualified	TINO OL AOL	
					11/21/1994	-	
	lace of Business	2a. Mailing Address			4. FEI Number	Applied For	
21		26			59-3287890	Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional	
22 City & State		City & State				Fee Required	
City & State		28			6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip	Country	Zip	Country		8. This corporation owes or has paid th		
24	25	29	¬ '		Personal Property Tax due June 30.	Yes No	
g. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 11. Name							
ABEL, SUSAN				me	•		
	41 MCARTHUR LABE		82 Street Address (P.O. Box Number		ss (P.O. Box Number is Not Acceptable)		
COCOA FL 32922			83			WANT TO MANY TO THE TOTAL TO TH	
			83				
			84 Cit	у		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 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 tamiliar with, and accept the obligations of, Section 607.0505, Florida Statutes.							
SIGNATURE Signature. typed or printed number of registered agent and title if applicable. (NOTE, Registered Agent signature required when reinstating)						ATE	
12.	OFFICENS AN	ID DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS		
TITLE	D	L_ DELETE	1.1 TITLE			Change L Addition	
NAME	ABEL, SUSAN		1.2 NAME				
STREET ADDRESS	1541 MCARTHUR LANE COCOA FL		1.3 STREET ADOR	ESS			
CITY-ST-ZIP TITLE	D COCOA PL	DELETE	1.4 CITY-ST-ZIP	+		Change Addition	
NAME	HARDY, BONNIE		2.2 NAME			El Armide 11 Maritan	
STREET ADDRESS	4529-MGARTHUR-LANE		2.3 STREET ADDRESS		DID TIMBER LANE		
CITY-ST-ZIP	COCOA FL 32922		2. 4 CITY-ST-ZIP	" Of	010 TIMBER LANE 000A FL 30926	-	
TITLE	D	DELETE	3.1 TITLE	1	,co.,	Change Addition	
NAME	ADEL, RICHARD		3.2 NAME				
STREET ADDRESS	1541 MCARTHUR LANE		3.3 STREET ADOR	ESS			
CITY-ST-ZIP	COCOA FL		3.4. CITY-ST-ZIP	}			
TITLE	D	☐ DELETE	4.1 TITLE	1		Change Addition	
NAME	HARDY, LEE		4. 2 NAME	_	<u></u>		
STREET ADDRESS	4529 MCARTHUR-LANE		4.3 STREET ADDR	iss 5	010 TIMBER LANE	-	
CITY-ST-ZIP	COCOA FL 32922		4.4 CITY-ST-ZIP	$-\mathcal{C}c$	DCOAFL 32926		
TITLE		DELETE	5.1 TITLE			Change Addition	
NAME			5.2 NAME				
STREET ADDRESS			5.3 STREET ADDR	ESS			
City - St - ZiP		The ere	5.4 CITY-ST-ZIP			Observe 1 4 2 2 1111	
TITLE		☐ DELETE	6.1 TITLE	ļ		L Change L Addition	
NAME		:	6.2 NAME	[
STREET ADDRESS		,	6.3 STREET ADDR	SS			
CITY-ST-ZIP	cartify that the information supplied w	with this filing does not qualify for	6.4 CITY-ST-ZIP	tated in S	ection 119 07(3)(i) Florida Statutes I furth	per certify that the information	

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.

SIGNATURE:

TUSANT THE PISUS AND PABEL

1-22-98

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