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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1996

VIFFU	ISION HAIR SALON, INC.					
Principal Place	of Business	Maling Address			90/18 IQIBO 11118 1810	11 1144 110 100
13715 S.W. MIAMI FL 3		13715 S.W. 152ND S MIAMI FL 33177-1106				
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				12/29/1994	04/18/19	
;	lace of Business	2a. Mailing Address		4. FEI Number		Applied For Not Applicable
Suite, Apt	h ata	Suite, Apl. #, etc.		65-0549932		Additional
Suite, Apr.	F, E10	27		5. Certificate of Status Desired		Required
City & State	e	City & State		6. Election Campaign Financing	\$5.00	May Be
		28		Trust Fund Contribution	•	d to Fees
Ζφ	Country	Zipi	Country	8. This corporation has liability for intang		199.032,
4	25	29	30]	Florida Statutes Yes		
	9. Name and Address of Curre	ni megistereo Agent	81 Name	10. Name and Address of New Regist	eren wâaur	
10	oronor i					
	GEORGE J		82 Street Ac	dress (P.O. Box Number is Not Acceptable)		
% LOTT & LEVINE 5975 SUNSET DR., SUITE 302			63			
	•				11 ~	. 0. 1.
MIAMI FL 33143			84 City		FL 85 Zip	o Code
12. I`LF	Styrates, typed crips by have of regished ago		CODE Plantage A code on the con-	and all an appropriately of	W. 1	
		ND DIRECTORS DELETE	F16: Flagstered Agent Signature requirement 13. 1 1 Title	ADDITIONS/CHANGES TO OFFICER	S AND DIRECTO Change	DRS IN 12
NAME	DP	ND DIRECTORS	13.		S AND DIRECTO	
NAM!		ND DIRECTORS	13. 1 1 TITLE		S AND DIRECTO	
NAME STREET ALIGNESS	DP DELASCASAS, SHEILA A	ID DIRECTORS	13. 1 1 THE 12 NAME		S AND DIRECTO Change	Addition
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I do nereby certify that the information supplied with this tring is voluntarily turnished 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 ooth, that I am an officer or director of the corporation of 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 chapted on up an attaighment with an address SOF SIGNING OFFICER OR DIRECTOR

SIGNATURE:

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