PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

711110	1996	DI	Secretary of St VISION OF CORPC		ONS			
DOCUI	MENT # P950	0000406	7 (1)					
THE S	trand international	HAIR, INC.				( 300) ( 00 40) D. D. H. D.	ti danı Bakı dıdı ad	II <b>A B</b> (()) ( <b>BS</b> ( <b>:B</b> 0)
					·			
Principal Place of Business Mail								
747 SOUTHO SARASOTA I		747 SOUTH SARASOTA	igate plaza Fl <b>342</b> 39					
						01/11/1995	3a. Date of Last I	Report
2. Principa! Pla	ace of Business	2a. Mailing Ad	loress			4. FEI Number 59 - 3292597	Ţ	Applied For Not Applicable
Suite, Apt.	#, etc.		Suite, Apt. #, etc.				_ \$8.7	5 Additional
2		27	······································			Certificate of Status Desired	Fee	Required
Crty & State	0	Oity & Sta	City & State			6. Election Campaign Financing Trust Fund Contribution		00 May Be ed to Fees
Zip 4	Country 25	Zip 29	30 30	ountry		This corporation has liability for inta     Florida Statutes		s 199.032,
<u> </u>	9. Name and Address of Cu					10. Name and Address of New Reg	-	
				81	Name			
	ER, CRAIGER			82	Street Ad	idress (P.O. Box Number is Not Acceptable)		
	UTHGATE PLAZA DTA FL 34239			83		/ · · · · · · · · · · · · · · · · · · ·		
ONITION	71A 1 L 01209							
				84	City		FI 85 Z	ip Code
SIGNATURE .	th, and accept the obligations of, s Structure, typed or printed many of registered. OFFICERS				l Signature requ	Linco when revisibling!  ADDITIONS/CHANGES TO OFFICE	DAYE RS AND DIRECTI	ORS IN 12
TITLE	D DELETE		DELETE 1	_		D	[_] Change	Addition
NAME	SCHEUER, CRAIGER		_	NAME		Randy Alabach		
STREET ADDRESS	P.O. BOX 21652 SARASOTA FL 34276				ADDRESS	427 S. Palm Ave. #.		
CITY-ST-ZIP TITLE	ONIMOUTA IL 34270			CHY-S	1- ZIP	Sarasota, FL 34236	[1] Change	<b>⊠</b> Addition
NAME		<u></u> ,		NAME		Sharon A. Brantley	L., onlings	M Noution
STREET ADDRESS			23	STREET	ADDRESS	643 Ponder Ave.		
CITY-ST-ZIP			24	CITY-S	1-7IP	Sarasota, FL 34232		
THLE			li i	TITLE		TD	Change	Addition
NAME				NAMÉ		Rodney L. Martin		
STREET ADDRESS					ACORESS	5480 Sawgrass Rd.		
CITY - ST - ZIP TITLE				CITY-S LTITLE	1 - ZIF'	Sarasota, FL 34232	☐ Change	Addition
NAME				NAME				
STREET ADDRESS					ADDRESS			
CHY-ST-ZIP				CITY-S	T- <b>7</b> IP			
TITLE		[]]	DELETE 5	TITLE	I -		[iii] Change	
NAME							L_) ona igo	Addition
\$TREET ADDRESS				NAME			onongo	Addition
CITY OF THE			5.3	NAME STREET	ADDRESS			Addition
		<u> </u>	5.3 5.4	NAME STREET CITY-S				
CITY-ST-ZIP TITLE NAME		[_](	5.3 5.4 DELETE 6.3	NAME STREET			Change	☐ Addition
TITLE			53 54 DELETE 62	NAME STREET CHY-S THLE NAME				

6.4 CLY - \$1-2IP

14. If do hereby certify that the information supplied with this fring is voluntarily furnished 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 oath; that I am an officer or director of the cooperation or trustee employered 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: JAMAS TYPED PHYPINING OF SIGNING OFFICER OR DIRECTOR TO

4/30/96 (94D951-1590

CR2E034 (12/95)