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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000051396 (6)

STUDIO V HAIRSTYLING, INC.

FILED Apr 27 1998 8:00am Secretary of State



Principal Place of Business	Mailing Address		t landindt tip fordt greit antil de lit antil nate	Lanen tifte fetit falle afer ich i.
250C EAST COMMERCIAL BLVD. 250C EAST COMMERCIAL BLVD.				
LAUDERDALE-BY-THE-SEA FL 33308	LAUDERDALE-BY-THE-SE	A FL 33308	DO NOT WRITE IN THIS SPACE	
			3. Date Incorporated or Qualified	
			06/29/1995	
2. Principal Place of Business	2a. Mailing Address		4. FEI Number	Applied For
21	26		65-0593315	Not Applicable
Sulte, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
22	27			Fee Required
City & State	City & State		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip Country	28	Country	This corporation owes or has paid the	
24 25	29	30	Personal Property Tex due June 30.	Yes No
9. Name and Address	s of Current Registered Agent		10. Name and Address of New Register	ed Agent
YOUNG, MONICA Y		81 Name		
250C EAST COMMERCIA		82 Street Add	ress (P.O. Box Number is Not Acceptable)	
Lauderdale-by-the-se	A FL 33308			
		83		
		84 City		- 85 Zip Code
				EL 65 Zip code
office or registered agent, or both.	in the State of Florida. Such chan ge w as a	authorized by the corporat	poration submits this statement for the purpos tion's board of directors. I hereby accept the	appointment as registered
agent. I am familiar with, and accep	ot the obligations of, Section 607.0505, Fl	orida Statutes.	• ,	-
SIGNATURE	f registered agent and little if applicable (NOI	I : Registered Agent signature requi	ired when reinstating) DA1	·
	ICERS AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS	
TITLE D	☐ DELETE	11 TOTLE		Change Addition
NAME YOUNG, MONICA D		1.2 NAME		
STREET ADDRESS 250C EAST COMME		1.3 STREET ADDRESS		
CITY-ST-ZIP LAUDERDALE-BY-TH		1.4 CITY-ST-ZIP		
TITLE	☐ ĐELĒTE	2.1 TITLE		☐ Change ☐ Addition
NAME		2.2 NAME		i
STREET ADDRESS		2.3 STREET ADDRESS		
CITY-ST-ZIP	DELETE	2. 4 CITY - ST - ZIP		Change Addition
TITLE	L' DEFEIG	3.1 TITLE		☐ Change ☐ Addition
NAME Street address		3.2 NAME 3.3 STREET ADDRESS		
CITY-ST-ZIP		3.4 CITY-ST-ZIP		
TITLE	DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME		4. 2 NAME		
STREET ADDRESS		4.3 STREET ADDRESS		
CITY-ST-ZIP		4.4 CITY - ST - ZIP		
TITLE	DELETE	5.1 TITLE		Change Addition
NAME		5.2 NAME		(
STREET ADDRESS		5 3 STREET ADDRESS		
CITY+\$T-ZIP		5.4 CITY-ST-ZIP		
TITLE	DELETE	6.1 TITLE		Change Addition
NAME		6.2 NAME		}
STREET ADDRESS		6.3 STREET AODRESS		
CITY-SI-ZIP	and the state of t	6.4 CITY-ST-ZIP	Continue (10.07(0)(0) Firedella (1)	
194 I nereby certify that the information	supplied with this find does not quality to	or trie exemption stated in	Section 119.07(3)(i), Florida Statutes. I furthe	receiting 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.