

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

FILED  
May 15 1998 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P95000062981 (2)

1. Corporation Name

PREMIER HAIR STYLING, INC.

Principal Place of Business

1258-B PROVIDENCE BLVD.  
DELTONA FL 32725

Mailing Address

1258-B PROVIDENCE BLVD.  
DELTONA FL 32725



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21 1240 #4 Providence Blvd		26 Suite, Apt. #, etc.		08/14/1995	
22 Deltona FL		27 City & State		4. FEI Number	
23 32725 Deltona, FL		28 Zip		59-3333134	
24 32725		25 USA		5. Certificate of Status Desired	
29		30		<input type="checkbox"/> \$8.75 Additional Fee Required	
3. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent		6. Election Campaign Financing	
PRUNIER, TAMMIE A		81 Name		<input type="checkbox"/> \$5.00 May Be Added to Fees	
1258-B PROVIDENCE BLVD.		82 Street Address (P.O. Box Number is Not Acceptable)		8. This corporation owes or has paid the current year Intangible	
DELTONA FL 32725		83		Personal Property Tax due June 30.	
		84 City		<input type="checkbox"/> Yes <input type="checkbox"/> No	
		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 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 familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Tammie Prunier

(NOTE: Registered Agent signature required when reinstating)

4/29/98

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D PRUNIER, ALAN J	1.1 TITLE	
NAME	276 SANTORO CIRCLE	1.2 NAME	
STREET ADDRESS	DELTONA FL 32725	1.3 STREET ADDRESS	
CITY-ST-ZIP		1.4 CITY-ST-ZIP	
TITLE	D PRUNIER, TAMMIE A	2.1 TITLE	
NAME	276 SANTORO CIRCLE	2.2 NAME	
STREET ADDRESS	DELTONA FL 32725	2.3 STREET ADDRESS	
CITY-ST-ZIP		2.4 CITY-ST-ZIP	
TITLE		3.1 TITLE	
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

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:

Tammie Prunier

4/29/98 407-574-5200

CR2E034 (10/97)