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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

Feb 18 1997 8:00am

Secretary of State

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000065016 (4)

PLEASURABLE PIERCINGS SOUTH, INC.

Principal Place of Business Mailing Address 417 LAFAYETTE AVE 417 LAFAYETTE AVE 1330 HAMBURG TURNPIKE 1330 HAMBURG TURNPIKE HAWTHORNE NJ 07506 HAWTHORNE NJ 07508-2516 US US					3. Date Incorporated or Qualified 3a. Date of Last Report			
					08/22/1995	04/23/	1996	
├ ── `	Place of Business	2a. Mailing Address			4. FEI Number		Ap	plied For
21		26			12-2339339			1 Applicable
Suite, Apt.		Suite, Apt. #, etc.			5. Certificate of Status Desired		\$8.75 / Fee Re	
City & Stat	le	City & State			Election Campaign Financing Trust Fund Contribution		\$5.00 Added t	
Zip	Country 25	Zip 29	Country 30		8. This corporation has liability for Florida Statutes	intangible ta		199.032,
	9. Name and Address of Curre				10. Name and Address of New Re	gistered Ag	ent	
COR	PORATION SERVICE COMPANY		81 Na	me				
1201 HAYS STREET TALLAHASSEE FL 32301-2525			82 Str	eet Addre	ress (P.O. Box Number is Not Acceptable)			
IALL	ANASSEE FE SESSITESES		83				·· ·	
			84 Cit	/		FL	85 Zip (Code
agent. I a SIGNATURE	am familiar with, and accept the oblig Signature pred or printed name of registered as	lations of, Section 607.0505, Flo	rida Statules. Registered Agent sign	·		7 DATE		
12.		D DIRECTORS	13.		ADDITIONS/CHANGES TO OFFI			
THLE	PD WILLIAM D	☐ DELETE	1.1 TITLE	- 1		L	_] Change	☐ Addition
NAME	KREBS, WILLIAM R 417 LAFAYETTE AVENUE		1.2 NAME					
	HAWTHORNE NJ		1.3 STREET ADDRE	:55				
CITY-ST-ZIP TITLE	VD	DELETÉ	1.4 CiTY-ST-ZIP 2.1 TITLE				Change	Addition
NAME	(0704 HARTI) (2.2 NAME				_	_
S*REET ADDRESS	417 LAFAYETTE AVENUE		2.3 STREET ADDRE	ss				ľ
CITY-ST-ZIP	HAWTHORNE NJ		2. 4 CITY-ST-ZIP					
TITLE		☐ DELETE	3.1 TITLE		-	Ţ. [Change	Addition
NAME			3.2 NAME	- 1				1
STREET ADDRESS			3.3 STREET ADDRE	SS				
C/1Y-S1-7IP TITLE		DELETE	3.4. CITY-ST-ZIP 4.1 TITLE				Change	Addition
NAME		L_I OCCU	4.1 TITLE				crange	
STREET ADDRESS			4.2 NAME 4.3 STREET ADDRE	.ee				ĺ
CITY-ST-ZIP			4.4 CITY - ST - ZIP	.55				
TITLE		DELETÉ	5.1 T(TLE				Change	Addition
NAME			5.2 NAME					}
STREET ADDRESS			5.3 STREET ADDRE	SS				
CITY-ST-7IP			5.4 CITY - ST - ZIP					
TOLE		☐ DELETE	6 1 TITLE				Change	Addition
NAME			6.2 NAME	-				ļ
STREET ADDRESS	1		6.3 STREET ADDRE	SS				ĺ

14. I do horeby 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.

6.4 CITY - ST - ZIP

SIGNATURE: O MARCH & A TIME AND