

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

FILED

Mar 06 1997 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P95000065853 (0)

1. Corporation Name:  
HAIR CREATIONS OF MIAMI INC

Principal Place of Business:  
17407 SOUTH DIXIE HWY  
MIAMI FL 33157

Mailing Address:  
17407 SOUTH DIXIE HWY  
MIAMI FL 33157-5434



2. Principal Place of Business:

21 Suite, Apt. #, etc.

22 City & State:

23 Zip Country

24

2a. Mailing Address:

26 Suite, Apt. #, etc.

27 City & State:

28 Zip Country

29 30

3. Date Incorporated or Qualified  
08/24/1995

3a. Date of Last Report  
04/12/1996

4. FEI Number  
65-0802203

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution ☐

\$5.00 May Be  
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

VEARGIS, LAKEISHA J  
17407 SO. DIXIE HWY  
MIAMI FL 33157

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

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

Signature, typed or printed name of registered agent and fee, if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

1 P ☐ DELETE  
NAME VEARGIS, LAKEISHE J  
STREET ADDRESS 17407 SO. DIXIE HWY  
CITY- ST- ZIP MIAMI FL 33157

☐ DELETE  
NAME  
STREET ADDRESS  
CITY- ST- ZIP

☐ DELETE  
NAME  
STREET ADDRESS  
CITY- ST- ZIP

☐ DELETE  
NAME  
STREET ADDRESS  
CITY- ST- ZIP

☐ DELETE  
NAME  
STREET ADDRESS  
CITY- ST- ZIP

☐ DELETE  
NAME  
STREET ADDRESS  
CITY- ST- ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY- ST- ZIP

2.1 TITLE ☐ Change ☐ Addition  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY- ST- ZIP

3.1 TITLE ☐ Change ☐ Addition  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY- ST- ZIP

4.1 TITLE ☐ Change ☐ Addition  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY- ST- ZIP

5.1 TITLE ☐ Change ☐ Addition  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY- ST- ZIP

6.1 TITLE ☐ Change ☐ Addition  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY- ST- ZIP

000002106540  
-03/06/97--01099--040  
\*\*\*165.00

3/6/97

14. I do 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 provided 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:

Lakeisha Veargis

Lakeisha Veargis

1-21-97 (305) 278-1818

CR2E034 (9/96)