PROFIT CORPORATION ANNUAL REPORT 1997

CITY-ST-ZIP



Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS Apr 30 1997 8:00am

Secretary of State

DOCUMENT # P95000080314 (4)

FANTASTIC CRYSTAL NAILS INC.

Principal Place	o of Rusinger	Mailing Address		- 					
Principal Place of Business 9726 S.W. 40TH STREET MIAMI FL 33165		9726 S.W. 40TH STREET MIAMI FL 33165-4032							
						3. Date Incorporated or Qualified 10/19/1995	3a. Date 05/01/		port
2. Principal Pi	ace of Business	26. Mailing Address 26				4. FEI Number 65-0619872		No	plied For t Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc. 27				5. Certificate of Status Desired		8.75 A Fee Re	
City & State	9	City & State				Election Campaign Financing Trust Fund Contribution		\$5.00 Added to	
Zip 24	Country 25	Zip 29	Country 30				Yes 🔲 I	Νo	199.032,
	9. Name and Address of Currer	nt Registered Agent				10. Name and Address of New Reg	gistered Ago	ent	
PAS	CUAL, ELIZABETH			B1	Name				
9726	3 S.W. 40TH STREET MI FL 33165			B2	Street Addre	ess (P.O. Box Number is Not Acceptab	le)		
			Ī	83					
			-	84	City			35 Zip (Code
					•		FL		
11. Pursuant office or re agent. I a	to the provisions of Sections 607.050 egistered agent, or both, in the State in familiar with, and accept the oblig	02 and 607.1508, Florida Statu o of Florida. Such change was pations of, Section 607.0505, F	tes, the ab authorized lorida Statu	ove-r by tl utes.	named corpo he corporation	oration submits this slatement for the p on's board of directors. I hereby accep	urpose of ch It the appoin	anging its tment as	s registered registered
SIGNATURE						_,			
12.	Signature, lyped or printed name of registered ag	ID DIRECTORS	13.	Ageni	signature require	d when reinstating) ADDITIONS/CHANGES TO OFFIC	ERS AND D	RECTOR	S IN 12
TITLE	D	DELETE				7,00111010701711020 10 01110		Change	Addition
NAME	PASCUAL, ELIZABETH			1.2 NAME			-		
STREET ADDRESS	9726 S.W. 40TH STREET				DORESS				
CITY-ST-ZIP	MIAMI FL 33165		1.4 CIT	Y - \$1 -	ZIP				
TITLE		☐ DELETE :		2.1 TITLE				Change	Addition
NAME			2.2 NA	2.2 NAME					
STREET ADDRESS			2.3 \$1	REET AL	DORESS				
CITY-ST-ZIP			2. 4 Ci	1Y-\$1-	- ZIP		•		
TITLE	☐ DELETE		3.1 111	3.1 THLE				Change	Addition
NAME			3.2 NA	Μέ					
STREET ADDRESS			3 3 \$18	BEET AC	DDRESS				
CITY-ST-ZIP			3 4. CC	1y - S1 -	- 71P				
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NAME			4. 2 NA	AME					
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TITLE		☐ DELETE	5 1 117	fΕ			· L	Change	Addition
NAME			5 2 NA		-				
STREET ADDRESS			53 ST	HEET AL	DDRESS				
CITY-ST-ZIP				IY-SI-	ZIP			Lac	
TITLE		☐ DELETE	6 1 117				L.	} Change	Addition
NAME			62 NA	M[
STREET ADDRÉSS			6.3 STI	REFT A	DDRESS				

14. Ido hereby certify that the information supplied with this firing does not qualify for the exemption stated in Soction 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 eath, 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.

64 CHY-ST-ZIP