## SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997. AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

PROFIT **CORPORATION** ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P9600008894 (3)

HAIRSTREAK DEVELOPMENT CORP.

<u> </u>	
Principal Place of Business	Mailing Addre

## **FILED** Sep 15 1997 8:00am Secretary of State



22   All SOUTH   ST. AUGUSTINE FL 12066   St	ST. AUGUSTINE FI. 32066   ST. AUGUSTINE FI	Dringing Di	non of Business	Mailing Address		
ST. AUGUSTINE FL. 32066   St. AUGUSTINE FL. 32064   St. AUGUSTINE FL	ST. AUGUSTINE FL. 32096  2. Principal Place of Business 2. A Malling Address 2. Principal Place of Business 2. A Malling Address 2. A M	•	•	•		
2. Principal Place of Business   2a. Making Address   2b. Making Address	2. Principal Piace of Business 2. Mailing Address 2. Principal Piace of Business 2. Mailing Address 2. Principal Piace of Business 2. Mailing Address 2. Entire County 2. Sulfe, Apt. 4. etc. 2. Sulfe, Apt. 4					
2	2. Principal Place of Business 2. 28. Mailing Address 25. V. S. I. South 4. Filt Number 335.93+4.   Applied For ST. 235.93+4.   Not Applied For St. 25.   Not Applied For For For Part Applied For For St. 25.   Not Applied For For For For Part Applied For For For For For For Part Applied For	OI. NUGUSII	NC 7 L 02000	01. NOODSTINE 12 02000		DO NOT WRITE IN THIS SPACE
28. Maling Andress 29 2/5 N S   South	2. Principal Place of Business   2a. Malling Address   5   3.5		:			3. Date Incorporated or Qualified 3a. Date of Last Report
28. Maling Andress 29 2/5 N S   South	2. Principal Place of Business   2a. Malling Address   5   3.5					01/29/1996
Spile. Apt #, etc.    20	Suite, Apt. 8, etc.    Suite, Apt. 8, etc.	2. Principa	Place of Business			4. FEI Number Applied For
Solido, Apl. #, etc.  2	Sulle, Apt #, etc.  27	21		26 2567 US 150	outh	59 - 3359344 Not Applicable
27   SUMPLE   10   State   28   St.   M. Agust   10   St.   Country   28   St.   M. Agust   10   St.   Country   29   3,00 Mby Be Added to Fees   29   20   3,00 Mby Be Added to Fees   20   20   3,00 Mby Be Added to St.	City & State   City & State   Country   28   St AAMUSTINE   FL   State   Country   28   St AAMUSTINE   FL   State   St AAMUSTINE   State   St AAMUSTINE   State   St AAMUSTINE   State   St AAMUSTINE	Sulte, Ap	ot. #, etc.			5 Certificate of Status Desired S8.75 Additional
City & State  20	City & State 23	22				Fee Required
Country   Page	Country   Zip   2   2   2   3   3   5   5   5   3   3   5   5   5	City & S	ate			6. Election Campaign Financing \$5.00 May Be
28	Personal Property Tax dou June 30.    vies   No    Name and Address of Current Registered Agent   10. Name and Address of New Registered Agent   10. Name and Address   10. Name and					Trust Fund Contribution
11. Pursuant to the provisions of Sections 607 0502 and 607 1508. Florida Statutes, the above-named conscretion extrinits this statement for the purpose of changing its registered agent.  11. Pursuant to the provisions of Sections 607 0502 and 607 1508. Florida Statutes, the above-named conscretion extrinits this statement for the purpose of changing its registered agent, and familiar with, and accept the obligations of, Section 607 0505, Florida Statutes, agent, and familiar with, and accept the obligations of, Section 607 0505, Florida Statutes.  12. OFFICERS AND DIRECTIONS  13. TITLE  14. OFFICERS AND DIRECTIONS  15. TITLE  15. TAUGUSTINE FL 32084  16. OFFICERS AND DIRECTIONS  16. ADDITIONS/CHANGES TO OFFICERS AND DIRECTIONS  17. AUGUSTINE FL 32084  16. OFFICERS AND DIRECTIONS  17. AUGUSTINE FL 32084  17. OFFICERS AND DIRECTIONS  18. ADDITIONS/CHANGES TO OFFICERS AND DIRECTIONS IN 12 TITLE  18. ADDITIONS/CHANGES TO OFFICERS AND DIRECTIONS IN 12 TIME  18. ADDITIONS/CHANGES TO OFFICERS AND DIRECTIONS IN 12 TIME  18. TAUGUSTINE FL 32084  16. OFFICERS AND DIRECTIONS  17. AUGUSTINE FL 32084  16. OFFICERS AND DIRECTIONS  17. AUGUSTINE FL 32084  18. SIRRET ADDRESS  18. AUGUST	### Sines and Address of Current Registered Agont  TRAYNOR, JOHN M ESQ. 28 CORDOVX STREET  ST. AUGUSTINE FL 32084  #### Sire Address (P.O. Box Number is Not Acceptable)  ### Sire Address (P.O. Box Number is Not Acceptable)  ### Sire Address (P.O. Box Number is Not Acceptable)  ### Sire Address (P.O. Box Number is Not Acceptable)  ### Sire Address (P.O. Box Number is Not Acceptable)  ### Sire Address (P.O. Box Number is Not Acceptable)  ### Sire Address (P.O. Box Number is Not Acceptable)  ### Sire Address (P.O. Box Number is Not Acceptable)  ### Sire Address (P.O. Box Number is Not Acceptable)  ### Sire Address (P.O. Box Number is Not Acceptable)  ### Sire Address (P.O. Box Number is Not Acceptable)  ### Sire Address (P.O. Box Number is Not Acceptable)  ### Sire Address (P.O. Box Number is Not Acceptable)  ### Sire Address (P.O. Box Number is Not Acceptable)  ### Sire Address (P.O. Box Number is Not Acceptable)  ### Sire Address (P.O. Box Number is Not Acceptable)  ### Sire Address (P.O	Zip	Country	F 21.77	a '	
TRAYNOR, JOHN M ESO. 28 CORDOVA STREET ST. AUGUSTINE FL 32084  89 Street Address (P.O. Box Number is Not Acceptable)  11. Pursuant to the provisions of Sections 607 0502 and 607 1508, Florida Statutus, the between amend corporation submits this statement for the purpose of changing its registered effice or registered agent, or both, in the State of Florida Statutus, the observenamed corporations board of directors. Thereby accept the purpose of changing its registered effice or registered agent, or both, in the State of Florida Statutus, the observenamed corporations board of directors. Thereby accept the purpose of changing its registered effice or registered registered efficiency and accept the purpose of changing its registered efficiency accept the purpose of changing its registered efficiency.  12.	TRAYNOR, JOHN M ESO. 28 CORDOVA STREET ST. AUGUSTINE FL 32084  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 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, and accept the obligations of, Sociotine 607,6505, Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent, and accept the obligations of, Sociotine 607,6505, Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent, and accept the obligations of, Sociotine 607,6505, Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent, and accept the obligations of, Sociotine 607,6505, Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent, and accept to obligations of, Sociotine 607,6505, Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent, and accept to obligations of, Sociotine 607,6505, Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered as registered.  SIGNATURE    DELETE   DELETE   1. Interest	24		20	)	Tologram, Toponty Tax Coop Bollo Co.
28 CORDOVA STREET ST. AUGUSTINE FL 32084  88 SIreet Address (P.O. Box Number is Not Acceptable)  89 City  FL 95 Zip Code  11. Pursuant to the provisions of Sections 607 0502 and 607 1508, Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered office or registered agent, or both, in the State of Froida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent, or the familiar with, and accept two beginds of Sections 607 0505 froida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent, and the familiar with, and accept two deligations of Section 607 0505. Froida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent, and the corporation's board of directors. I hereby accept the appointment as registered agent, and the corporation's board of directors. I hereby accept the appointment as registered significant agent age	28 CORDOWS STREET ST. AUGUSTINE FL 32084  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 register 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  SIGNATURE  SIGNATURE  SIGNATURE  PO FFICERS AND DIRECTORS  ITHE  PO LEFTE  12 NAME  SIRET ADDRESS  SIRET ADDRESS  SIRET ADDRESS  SIRET ADDRESS  SIRET ADDRESS  SIRET ADDRESS  CITY-S1-2P  ST. AUGUSTINE FL 32084  14 City FL 85  Zip Code  Code  Interportation submits this statement for the purportation submits the experienter to experienter t			Registered Agont		10. Name and Address of New Registered Agent
ST. AUGUSTINE FL 32084  11. Pursuant to the provisions of Sections 607 0002 and 607 1508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, I am familiar with, and accept the obligations of, Socion 607 0005, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. I am familiar with, and accept the obligations of, Socion 607 0005, Florida Statutes, the obove-named corporation submits this statement for the purpose of changing its registered of the object	ST. AUGUSTINE FL 32084  83  84 City				81 Name	
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 agent, or both, in the State of Florida Statute, change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, and accept the obligations of Section 607 0505, Florida Statutes.    SIGNATURE				82 Street	Address (P.O. Box Number is Not Acceptable)
Section   Sect	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 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, it am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.  SIGNATURE  Signature, tyrid or presed name of registered agent and site if applicable  OFFICERS AND DIRECTORS  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  TITLE  NAME  KAPLER, GEORGE  12 NAME  SIGNATURE  KAPLER, GEORGE  13 SIREET ADDRESS  865 ATA BEACH BLVD., UNIT 30  13 SIREET ADDRESS  865 ATA BEACH BLVD., UNIT 30  13 SIREET ADDRESS  865 ATA BEACH BLVD., UNIT 30  14 CITY-ST-ZIP  TITLE  ST  OELETE  21 TITLE  ST  AUGUSTINE FL 32084  14 CITY-ST-ZIP  ST. AUGUSTINE FL 32084  15 SIREET ADDRESS  16 SPENCER STREET  22 SIREET ADDRESS  17 ST-ZIP  ST. AUGUSTINE FL 32084  18 SIREET ADDRESS  18 SIREET ADDRESS  19 SIREET ADDRESS  19 SIREET ADDRESS  10 DELETE  31 TITLE  32 SIREET ADDRESS  10 DELETE  34 CITY-ST-ZIP  ST. AUGUSTINE FL 32084  16 SPENCER STREET  32 SIREET ADDRESS  17 ST-ZIP  ST. AUGUSTINE FL 32084  18 STREET ADDRESS  18 STREET A	ST.	AUGUSTINE FL 32084			
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11. Pursuant to the provisions of Sections 607,0502 and 607,1508. Florida Statulos, the above-named corporation submits this glatement for the purpose of changing its 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, and accept the obligations of, section 607,0505, Florida Statulos.  SIGNATURE  Signature, hydrot or private name of registered agent and life it applicable.  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  TITLE  PD. DELETE  1.1 TITLE  PD. DELETE  1.1 TITLE  NAME  STREET ADDRESS  OTY-S1-2P  ST. AUGUSTINE FL 32084  1.2 PAME  STREET ADDRESS  CITY-S1-2P  TITLE  DELETE  4 TITLE  DELETE  5 TITLE  DELETE  4 TITLE  DELETE  5 TITLE	11. Pursuant to the provisions of Sactions 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. I am familiar with, and accept the obligations of, Soction 607 0505, Florida Statutes.  SIGNATURE    Signature				84 City	
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 agent. and familiar with, and accept the obligations of, Soction 607.6565, Florida Statules.  SIGNATURE  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  TITLE  PD	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 agent and the appointment as registered agent and accept the obligations of, Socion 607.0505, Florida Statules.  SIGNATURE    SIGNATURE   Signature, typed or present among of registered agent and title if Applicable   (NOTE Registered Agent agrature required when refinishing)   DATE					FL   <u>``</u>
SIGNATURE   Signature, typed or preside name of registrored agent and life if applicable   (NOTE Registrored Agent agentating)	SIGNATURE   Signature, typed or printed name of registered agent and life if Applicable* (NOTE Registered Agent signature requirted when reinstating)   DATE	office o	r registered agent, or both, in the State of	of Florida. Such change was auth	horized by the corp	corporation submits this statement for the purpose of changing its registered poration's board of directors. I hereby accept the appointment as registered
Signature, lyard or protein amount from the late place learned from elementaring   DATE	Signature. Typed or proted name of registrate append and life if applicable   (NOTE Registrated Apent eignature required when reinstating)   DATE			10.15 01, 300.10(1 007.0005, 1 10110	ja Sialoles.	
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14. Ido 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.

0-0-97