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

PROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000046901 (0)

BALZANO & COMPANY HAIR SALON, INC.

FILED May 06 1998 8:00am Secretary of State



Principal Place of Business Mailing Address									
	1041 SOUTH				SOUTHSIDE BLV	D			
1	29			129	129				
		LE FL 32256			JACKSONVILLE FL 32256 US				DO NOT WRITE IN THIS SPACE
US									3. Date Incorporated or Qualified 05/28/1996
-	Principal Place of Business			2a. M	2a. Mailing Address				4. FEI Number Applied For
21				26	Suite Apt. #. etc.				59-3382429 Not Applicable
22	Suite, Apt. #, etc.				Suite, Apt. #, etc.				5. Certificate of Status Desired S8.75 Additional Fee Required
	City & Stat	ity & State			City & State				6. Election Campaign Financing \$5.00 May Be
23				28	1	<u> </u>			Trust Fund Contribution Added to Fees
	Zip	h			Country		8. This corporation owes or has paid the current year Intangible		
24	 -		25 and Address of Cui	29	nd Aneni	30			Personal Property Tax due June 30. Yes No 10. Name and Address of New Registered Agent
	DE			Tonit Hogiston	ou ngom		81	Name	10. Hame with Address of Item negletered Agent
PEPER, RICHARD C JR 3020 HARTLEY ROAD									
SUITE 350					82 Street Ac			Street A	Address (P.O. Box Number is Not Acceptable)
JACKSONVILLE FL 32257						83			
							84	City	FL 85 Zip Code
11									corporation submits this statement for the purpose of changing its registered
	office or r	re giste red ag ı m fam iliar wi	ent, or both, in the S th, and accept the ol	tate of Florida. Digations of Sc	Such change was action 607,0505 F	s authoriza Horida Sta	ed by	the corpo	oration's board of directors. I hereby accept the appointment as registered
en	SNATURE		.,			101144			
	ANTO INC.	Signature, typed	or printed name of registered	tagent and title it ap	plicable (NC	DIE: Register	ed Age	nt signature r	required when reinstating) DATE
12		- BB	OFFICERS	AND DIRECTO		13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITL		PD PAL 7A1	IO NICUOLAC		DELETE		TITLE	J] Change Addition
NAA			NO, NICHOLAS	un.			NAME		
	EET ADDRESS		29 SOUTHSIDE BL	¥υ		1		ADDRESS	
CIT	r-ST-ZIP	-ZIP JACKSONVILLE FL VPD					1.4 CITY-ST-ZIP		Change Addition
NAN		ADECNIES AND					21 TITLE 22 NAME		Change C Adollor
	EET ADDRESS		29 SOUTHSIDE BL	vn				ADDRESS	
-	r-ST-ZIP		ONVILLE FL	••			CITY-9		*
TITL		31-24			DELETE			11-21	Change Addition
NAM					3.2 NAM		- 1		
	EET ADDRESS							ADDRESS	
City-st-zip				3.4. CITY-ST-ZIP			- 1		
_	FITCE				DELETE	DELETE 4.1 Tri			Change Addition
NAA	AE					4.2	NAME		
STR	EET ADORESS	1				4.3 \$	STREET	address	
CIT	r-ST-ZIP					4.4 (CITY-S	1-ZIP	
TITL	E	_			DELETE	5.11	TITLE	Ţ	☐ Change ☐ Addition
NAN	Æ	,				5.21	NAME		
STA	EET ADDRESS					5.3 (STREET	ADDRESS	
_	Y-ST-2IP			20.000		i.4 CITY-ST-ZIP			
TITL						i.1 TITLE		Change Addition	
NAX							NAME		
-	eet address							ADDRESS	
CITY	CITY-ST-ZIP 14. Thereby cortify that the information supplied with this filling does not qualify for the						CITY-S	T-ZIP	d in Contine 110 07/2V/1 Floride Chabites Limber and the the
14. I hereby certify that the information supplied with this filling 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 agricultary and appropriate 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 of the receiver or rusted employees to execute this required by Chapter 607 Florida Statutes; and that my name appears in Block 12 or Block 13 if changed of or an altertime with an address. SIGNATURE:									
S	IGNAT	URF:	Na Con	BE	and the	Kav	N/	But	7010 4/25/98