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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000047335 (0)

CANDY'S SUNSHINE SALON, INC.

Principal Place of Business

Mailing Address

8812 COUNTY ROAD 622 BUSHNELL FL 33513 8812 COUNTY ROAD 622 BUSHNELL FL 33513-7895

FILED Apr 01 1997 8:00am Secretary of State



							3. Date Inc 05/29/	orporated or Qualified	3a. Da	ite of Last R	leport	
2. Principal Pe	ace of Business		2a. Mailing Address			4. FEI Num			Ap	plied For		
1			26				59-3409824			No.	Not Applicable	
Suite, Apt. #, etc			Suite, Apt. #, etc.			5. Certificate of Status Desired			\$8.75 Additional Fee Required			
City & State)	2	City & State					Campaign Financing nd Contribution			May Be to Fees	
Ζφ [4]	Country 25	2	Zip !9	30	Country		Florida S		Yes [] No	. 199.032,	
	9. Name and Address	of Current Re	gistered Agent				10. Name a	nd Address of New Re	gistered /	Agent		
KOV	ACH, MICHAEL T.				B1	Name	14. F	otter				
7731 OLD FLORAL CITY ROAD SUITE 1					82	Street Add	dress (P.O. Box Number is Not Acceptable)					
						8812 CR 622						
FLO'	RAL CITY FL 34436-02	96		-	83							
					84	City Bu	shuell	FI.	FL	85 Zip	Code 3513	
11, Pursuant t	o the provisions of Section	ns 607.0502 and	d 607.1508, Florid	da Statutes, the	above	-named corp	poration submits	this statement for the p	ourpose of	changing it	ts registerec	
office or re	egistered agent, or both, in n familjar with, and accep	n the State of FI	lorida. Such chan	ide was authori	zed by	the corporal	tion's board of c	lirectors. I hereby accep	ot the app	ointment as	registered	
√	C /2 // - 0	VH	Pa	EUOD, I IOIIGG G		•			3/	25/1	907	
SI ATURE	Signature Typical or priored name of	registered agent and	titio if applicable	(NOTE: Regist	ered Age	nt signature requi	red when reinstating)		DATE			
12.	OFF	ICERS AND DIF	RECTORS	1:	3.		ADDITION	IS/CHANGES TO OFFIC	ERS AND	DIRECTOR	RS IN 12	
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NAME	KOVACH, MICHAEL '	T.		1.	2 NAME							
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	FLORAL CITY FL 344			١,	LAIDI A	T. 71P						
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