| COF ANNI | PROFIT RPORATION JAL REPORT 1999 | | FLORIDA DEPAR Katherin Secretary DIVISION CF C | MENT OF STATE e Harris of State | FI Apr 29, 1 Secreta 04-29-1999 9 | | | |
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| LE PAR | MENT # P9600 Name ASOL, SKIN AND BODY, I | NC. | 766 | | | | | |
| 845 BEE RID | ge RD | 3845 BEE RIDGE RD SARASOTA FL 34233 | | | | | | |
| arasota fl | . 34233 | SAHA | 1501A FL 34233 | | | TE IN THIS S | PACE | |
| | | | | | 3. Date Incorporated or Qualifed 05/2 1/1996 | 1 | | |
| Principal F | Place of Business | 2a. M | Mailing Address | | 4. FEI Number | | | plied For |
| Suite, Apt. | . #. etc. | 26 | Suite, Apt. #, etc. | | <u>65-0699286</u> | | \$8.75 / | t Applicable |
| · · · | · · · · · · · · · · · · · · · · · · · | 27 | | | 5. Certificate of Status Desired | | Fee Re | quired |
| City & Sta | te | 28 | City & State | | 6. Election Campaign Financing Trust Fund Contribution | | \$5.00 Added t | |
| Zip | Country | | Zip | Country | 8. This corporation owes the cu | rrent year inter | | |
| · | 25 9. Name and Address of Curr | 29 rent Registe | | 101 | Personal Property Tax. 10. Name and Address of New | Registered A | <u> </u> | |
| | | | | 220 3 | South Franklin Stree | Γ | | |
| 1. Pursuant office or l | to the provisions of Sections 607.0 registered agent, or bch. in the Sta m familiar with. and accept the babli | 502 and 607 te of Florida | 7.1508, Florida Statute Such change was au Section 607.0505, Flori | 84 City Tampa | a | FL | hanging its | 3602 |
| office or i agent. I a | registered agent, or bcth, in the Sta am tamilial with, and accept the boli Mundus | ite of Florida. igat ons of, S VUO | Section 607.0505, Flori MIND | 84 City Tampa s, the above-named corp thorized by the corporati da Statutes. | poration submits this statement for th ion's board of directors. I hereby acco RRETA | FL | 3 | 3602 |
| office or l agent. I a SIGNATUF:E | signature, typed or mittig name of registered agent, or both, in the States and accept the oblic signature, typed or mittig name of registered a OFFICERS. | ite of Florida igat ons of, S MUC agent and title if a | Section 607.0505, Flori | 84 City Tamp a s, the above-named curp thorized by the corporati da Statutes. | poration submits this statement for th ion's board of directors. I hereby acco RRETA | FL e purpose of cl ept the appoint 428 | 3 hanging its ment as reg | 3602 registered fistered |
| office or l agent. I a SIGNATUF:E 2. | signature, typed or entitied in the State Signature, typed or entitied in the of registered in OFFICERS | ite of Florida igat ons of, S MUC agent and title if a | Section 607.0505, Flori - MIND pplicable. (NOT = 1 | 84 City Tamp a s, the above-named curp thorized by the corporation da Statutes. Crity Crity y Crity y Crity hypistered Agent signature require 13. 1.1 TITLE 1.1 TITLE | poration submits this statement for th ion's board of directors. I hereby accu RLETIA ad when reinstating) | FL e purpose of cl ept the appoint 428 | hanging its ment as reg | 3602 registered gistered |
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