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

Mar 19 1998 8:00am FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham Secretary of State ANNUAL REPORT Socretary of State DIVISION OF CORPORATIONS 1998 **DOCUMENT** # P96000062398 (8) HAIR BY ADA & COMPANY, INC. Principal Place of Business Mailing Address 216 EAST OCEAN AVENUE 216 EAST OCEAN AVENUE LANTANA FL 33462 LANTANA FL 33462 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 07/23/1996 4. FEI Number 2. Principal Place of Business 2a. Mailing Address Applied For 26 65-0685605 Not Applicable Suite, Apt. #, etc Suite, Apl. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be П Trust Fund Contribution Added to Fees 28 Zip Country Country This corporation owes or has paid the current year Intangible 30 Personal Property Tax due June 30. X Yes ☐ No 24 25 29 9, Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name DIAZ, ROY A ESO 2101 CORPORATE BOULEVARD Street Address (P.O. Box Number is Not Acceptable) 82 **BOCA RATON FL 33431** 83 84 City 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 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 (NOTE Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE Change Addition 1.1 IIILE TITLE WOLTER, MICHAEL NAME 1.2 NAME 15308 95TH AVENUE NORTH STREET ADDRESS 1.3 STREET ADDRESS JUPITER FL 33478 CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Change Addition 2.1 TITLE TITLE NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS 2 4 CITY-ST-ZIP CITY - ST - ZIP DELETE Change Addition TITLE 31 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE 4.1 TITLE Addition TITLE 4.2 NAME NAME STREET ADORESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP Addition DELETE Change 5 1 TITLE TITLE NAME 52 NAME STREET ADDRESS **5 3 STREET ADDRESS** 5.4 CITY-ST-ZIP CITY-ST-ZIP

FILED

Change

Addition

14. 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 supplientental 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 of the receiver or trusted 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 group attributed with an address

SIGNATURE:

| Mattribute | Mattrib

6.1 TITLE

6.2 NAME 6.3 STREET ADDRESS

64 CITY-ST-ZIP

DELETE

TITLE

STREET ADDRESS

CITY - ST - ZIP