

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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS

FILED Jun 07, 2000 8:00 am Secretary of State

06-07-2000 90007 032 ***150.00

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HAIR BY ADA & COMPANY, INC.



Principal Place of Business 216 EAST OCEAN AVENUE LANTANA FL 33462 Mailing Address 216 EAST OCEAN AVENUE LANTANA FL 33462-3207

3. Date Incorporated or Qualified 07/23/1996 3a. Date of Last Report

2. Principal Place of Business Suite, Apt. #, etc. City & State Zip Country 2a. Mailing Address Suite, Apt. #, etc. City & State Zip Country 4. FEI Number 05-0685605 Applied For Not Applicable 5. Certificate of Status Desired \$8.75 Additional Fee Required 6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees 8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No

9. Name and Address of Current Registered Agent DIAZ, ROY A ESQ 2101 CORPORATE BOULEVARD BOCA RATON FL 33431

10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 Zip Code

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, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Table with columns: OFFICERS AND DIRECTORS, ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS. Includes fields for name, title, street address, city, state, zip for multiple individuals.

I do 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.

SIGNATURE: MICHAEL WOLTER 4/29/00

CR2E034 (9/96)