

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

FILED

May 05 1997 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



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

DOCUMENT # P96000064398 (6)

1. Corporation Name

PERSONAL HAIR CENTER, INC.

Principal Place of Business

100 W CYPRESS CREEK ROAD STE 910  
FT LAUDERDALE FL 33309

Mailing Address

100 W CYPRESS CREEK ROAD STE 910  
FT LAUDERDALE FL 33309-2112

3. Date Incorporated or Qualified  
08/01/1996

3a. Date of Last Report  
New Corporation

2. Principal Place of Business

21 1350 S. Powerline Rd.  
Suite, Apt. #, etc.

22 104B

23 Pompano Beach, FL.  
City & State

24 33069  
Zip

25 U.S.A.  
Country

2a. Mailing Address

26 1350 S. Powerline Rd.  
Suite, Apt. #, etc.

27 104B

28 Pompano Beach, FL.  
City & State

29 33069  
Zip

30 U.S.A.  
Country

4. FEI Number  
650703825

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

GORZECK, RANA M  
100 W CYPRESS CREEK ROAD STE 910  
FT LAUDERDALE FL 33309

10. Name and Address of New Registered Agent

81 Name  
Linda Accetta  
82 Street Address (P.O. Box Number is Not Acceptable)  
1350 S. Powerline Rd.  
83 Pompano Beach  
84 City  
FL 85 Zip Code  
33069

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 *Sandra B. Mortham*

4/24/97

12. OFFICERS AND DIRECTORS

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
PRESIDENT  
OKYO SHAIR  
1350 S. Powerline Rd  
Pompano Bch, FL 33069

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
[ ] DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
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[ ] DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
[ ] DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP  
PRESIDENT  
Linda Accetta  
1350 S. Powerline Rd.  
Pompano Bch, FL 33069

2.1 TITLE  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP  
DIRECTOR  
Jonathan Gonzalez  
1350 S. Powerline Rd.  
Pompano Bch, FL 33069

3.1 TITLE  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP  
[ ] Change [ ] Addition

4.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP  
[ ] Change [ ] Addition

5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP  
[ ] Change [ ] Addition

6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP  
[ ] Change [ ] Addition

14. 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 *Linda Accetta*

4/24/97

CR2E034 (9/96)