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

Mailing Address

3811 AIRPORT ROAD NORTH NAPLES FL 34105-2500

PROFIT CORPORATION **ANNUAL REPORT**

1997

Principal Place of Business

3811 AIRPORT ROAD NORTH

NAPLES FL 34105



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortflam

Sccretary of State DIVISION OF CORPORATIONS

POCUMENT # **P96000084741 (3)**

VANITIES - WE'RE MORE THAN SKIN DEEP, INC.

11030 Field Fair Drive

28. Mailing Address 2. Principal Place of Business 4. FEI Number Applied For 65-0719363 Not Applicable 26 Suite, Apt. #, etc. Suite. Apt # 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 23 Trust Fund Contribution 28 Added to Fees Żip Country Country 8. This corporation has liability for intangible tax under s. 199.032, 30 Yes No 24 25 29 Florida Statutes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name SCHAHRER, JODIE L 11030 FIELDFAIR DRIVE 82 Street Address (P.O. Box Number is Not Acceptable) NAPLES FL 34119 83 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. Schahrer SIGNATURE (NOTE: Registered Agent signature required when reinstalling) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. President DELETE Change Addition TITLE 3.1 UHUE Sharon Hamilton 1.2 NAME NAME 11030 FIELDFAIR Drive STREET ADDRESS 13 STREET ADDRESS Nuples FL CITY-ST-ZIP 1.4 CHY-S1-7IP DELETE Change Addition TITLE Vice President 2.1 TOUE Sara Beta Pezzano NAME 2.2 NAME 1737 Jewel Lane STREET ADDRESS 2.3 STREET ADDRESS Sectry Micasurer Danchon JODIE L. Schahrer Raystral Agait DELETE 2 4 CHY- \$1-2(P CITY-ST-ZIP 3.1 TITLE Change Addition TITLE 3.2 NAME

CITY-ST-ZIP 6.4 CHY-S1- XE 14. I do hereby certify that the information supplied with this filling 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.

3.3 STREET ADORESS 3.4. CITY-ST-7IP

4.3 STREET AUDRESS

53 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CTTY - ST - ZIP

4.4 CITY - ST - ZIP

4.1 TITLE

4 2 NAME

5.1 TILLE

5.2 NAME

6.1 TITLE 6.2 NAME

DELETE

DELLIE

DELETE

SIGNATURE:

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME

TITLE

NAME

TITLE

320.97

Change

Change

Change

Addition

Addition

Addition

FILED

May 07 1997 8:00am

Secretary of State

3a. Date of Last Report

3. Date Incorporated or Qualified

10/14/1996