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

**PROFIT** CORPORATION **ANNUAL REPORT** 

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

P97000019413 (8) **DOCUMENT** #

B & M BEAUTY SALON, INC.

Principal Place of Business Mailing Address 10423 SW 40 ST. 10423 SW 40 ST.

## **FILED** Feb 27 1998 8:00am Secretary of State



MIAMI FL 33165 MIAMI FL 33165 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 03/03/1997 2a. Mailing Address 2. Principal Place of Business FEI Numbe Applied For Not Applicable 26 21 Suite, Apt. #, etc. \$8.75 Additional Suito, Apt. #, etc 5. Certificate of Status Desired Fee Required 22 27 \$5.00 May Be City & State City & State 6. Election Campaign Financing Trust Fund Contribution Added to Fees 23 28 Zφ Country Zip 8. This corporation owes or has paid the current year Intangible X Yes □ No 30 Personal Property Tax due June 30. 24 25 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent R1 Name HERNANDEZ, BEATRIZ 10423 SW 40 ST. Street Address (P.O. Box Number is Not Acceptable) R2 **MIAMI FL 33165** 63 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 Horida. 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. DATE Signature, typed or printed name of registered agent and title if applicable ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS Change Addition \_\_ DELETE 1.1 TITU TITLE HERNANDEZ, BEATRIZ 1.2 NAME NAME 10423 SW 40 ST. 1.3 STREET ADDRESS STREET ADDRESS **MIAMI FL 33165** 1.4 CITY - ST - ZIP CITY-ST-ZIP Addition Change DELETE 2.1 TITLE BITLE PEREZ, MARTA 2.2 NAME NAME 10423 SW 40 ST. 2.3 STREET ADDRESS STREET ADDRESS **MIAMI FL 33165** 2. 4 CITY-ST-ZIP CITY-ST-ZIP Addition Change DELETE 3.1 THILE TITLE HERNANDEZ, RUDY 3.2 NAME NAME 10423 SW 40 ST. 3.3 STREET ADDRESS STREET ADDRESS **MIAMI FL 33165** CITY-ST-ZIP 3.4. CITY - \$T - ZIP Change Addition DELETE 4 1 TITLE TITLE **GUTIERREZ, GEORGE** 4 2 NAME NAME 10423 SW 40 ST. 4.3 STREET ADDRESS STREET ADDRESS MIAMI FL 33165 4.4 CITY - S1 - ZIP CITY-ST-ZIP Change Addition DELETE 5.1 TITLE THILE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY - ST- ZIP CITY-ST-ZIP Change Addition DELETE 61 TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CITY - ST - ZIP

14. Thereby 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.

Bertser

2/20/98

(305)220-3320