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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # **P97000045458**1. Corporation Name

HAIR CONNECTION NORTH, INC.

•							8130) D))) 8138	
Principal Plac	ce of Business	Mailing Address	**== -			IA MBIAN MBIAN MBINA	ELEGA DARIA DELL	I DALBA ADAL KODE
1842 N. TAMIA		1842 N. TAMIAMI TRAIL						
N. FT.MYERS FL 33917 N. FT.MYERS FL 33917			•					
						VRITE IN THIS	SPACE	1 20 20 2
					 Date Incorporated or Qualit 05/20/1997 	ed	(i	
2. Principal F	Place of Business	2a. Mailing Address			4. FEI Number	•	A	oplied For
21		26			65-0621788		N	ot Applicable
Suite, Apt.	. #, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	J - 🗆 .		Additional equired ,
City & Sta	ite	City & State			6. Election Campaign Financia Trust Fund Contribution	ng 🗆		May Be to Fees
Zip	Country	Zip	Cou	ntry	8. This corporation owes the o	current vear int	tangible	
24	. 25	29	30		Personal Property Tax.		Yes	; √ No
	9. Name and Address of Curren	nt Registered Agent			10. Name and Address of Ne	w Registered	Agent	^
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SHI	DLER, JANET	•		82 Street Add	dress (P.O. Box Number is Not Acce	antoblo\		
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	to the provisions of Sections 607.050 registered agent, or both, in the State am familiar with, and accept the obliga				poration submits this statement for t ion's board of directors. I hereby ac	cept the appoi	ntment as re	gistered
	am familiar with, and accept the obliga	tions of, Section 607.0505, Flo			poration submits this statement for i	cept the appoi	ntment as re	gistered
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14. I 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, with all other like empowered.

6.4 CITY-ST-ZIP

FILED

Jan 25, 1999 8:00am

Secretary of State

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