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

PROFIT **CORPORATION** ANNUAL REPORT

1**9**98



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000059089 (7)

TIPS AND TOES NAIL SALON, INC.

Principal Place of Business

1970 HWY 87. #104

Mailing Address

1970 HWY 87, #104

FILED Jun 29 1998 8:00am Secretary of State



NAVARRE FL 32506 NAVARRE FL 32566 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 07/03/1997 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 105 and loes Vail Salon, Inc 26 Not Applicable Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 8143 navarre Parkwan Fee Required City & State 6. Election Campaign Financing \$5.00 May Be 28 Trust Fund Contribution Added to Fees Country Zip Country B. This corporation owes or has paid the current year Intangible Santa Rosa 29 30 Personal Property Tax due June 30. Yes ☐ No . Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent HALL, SHERRY 81 Name 116 PIPPIN DR. 82 Street Address (P.O. Box Number is Not Acceptable) MARY ESTHER FL 32569 83 City 85 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. SIGNATURE Signature, typed or printed hame of registered agent and title diapplicable (NOTE: Rogistered Agent signature required when reinstating) OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 PSTD DELETE TITLE 1.1 TITLE Change Addition **HALL. SHERRY** NAME 1.2 NAME 116 PIPPIN DR. STREET ADDRESS 1.3 STREET ADDRESS MARY ESTHER FL 32569 CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE TITLE 21 TITLE Change Addition NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2. 4 CITY-ST-ZIP DELETE TIFLE 3.1 DILE Change Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY - ST - ZIP TITLE DELETE 4.1 TITLE Change Addition NAME 4 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE TITLE 5.1 TITLE Change Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP DELETE TITLE 61 TITLE Change Addition 7184 NAME 6.2 NAME -07/01/98--01028--087 STREET ADDRESS 6.3 STREET ADDRESS ***150.00

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.

6.4 CITY - ST - ZiP

To Ms. Mortham
as of Jan. 26,1998 I

relocated my luminion to
8097 Navarre Parkway. The
County of Santa Rosa
Changed my address See. the enclosed
Shack Jan -

sherry Hall 1970 highway 87, suite 104 Novarre, FL 32566,939,8878