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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Northart

Socretary of State

FILED Jun 09 1998 8:00am Secretary of State

	199 8	DIVISIO	ON OF CORPORATIONS	Secretary of State
DOCUMENT # P9700063195 (6) PIGTAILS, INC.				* 150
	,			
Principal Plac	ce of Business	Mailing Address	<u>,</u>	
101 S.FLORIDA AVE 101 S FLORIDA AVE			AVE	e .
DELAND FL	32720	DELAND FL 3272	0	DO NOT WRITE IN THIS SPACE
				3. Date Incorporated or Qualified 07/17/1997
2. Principal Place of Business		2a. Mailing Addre	SS	4. FEI Number (Applied For
21		26	·- 	59-3465247 Not Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc.			etc.	5. Certificate of Status Desired S8.75 Additional
22 City & Stat	e	27 City & State		Fee Required
23		28		6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution
Zip	Country	Zip	Country	8. This corporation owes or has paid the current year Intangible
24	25	29	30	Personal Property Tax due June 30. Yes No
101	9. Name and Address of (Jurrent Hegistered Agent	81 Name	10. Name and Address of New Registered Agent
IRWIN, KELLY A 1070 S TARDUST WAY				NELLY A KWIN
DELAND FL 32720			82 Street	Address (P.O. Bex Number is Not Acceptable)
DELPORD FE 32720			83	N STANDON ON
·			84 City	PE AND
				FL 85 30720
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 register office or registered aggint, or both, in the Syrie of Florida Such change was authorized by the corporation's board of directors. I hereby accept the appointment as register				
agent. Lam lamillar with, and accept the colligations of Section 607.0505, Florida Statutes.				
SIGNATURE	The tree of an involved to also extract six		(NOTE: Registered Agent signature	toroward was renetation
12.	OFFICE	ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	Thistaces (GILYITWIN) IIII	ELE LITHTLE	Distauls (MUISSA NUHIA) Change Addition
NAME	LIM S. FV	nda are,	1.2 NAME	16/50 Martoude Que.
STREET ADDRESS	Deland -	7	1.3 STREET ADDRESS	Deland. 71. 32720
CITY-ST-ZIP TITLE	32-72-0	DIL	1.4 C(1Y - ST - Z(P ETE 2.1 TITLE	President Dange Raddition
NAME	fresident	O.T.	2.2 NAME	livolla trusia
STREET ADDRESS	1070 Stargu	st usay	2.3 STREET ADORESS	1070 Standart way
CITY-ST-ZIP	Beland F1	32728	2. 4 GITY - ST - ZIP	reland fl 32720
TITLE	Vice Presider	\ ☐ DEL	FIE 31 FITUE	Melissa nutting 440 North St
NAME	Melissa. nut	ting	3.2 NAME	Melissa nutring
STREET ADDRESS				Deteon Spring, Pl 32130
CITY-ST-ZIP TITLE		DII	3.4 CITY-ST-ZIP ETE 4.1 TITLE	Change Addition
NAME		<u> </u>	4. 2 NAME	
STREET ADDRESS			4.3 STREET ADDRESS	1
CITY-ST-ZIP			4.4 CITY-ST-ZIP	
TITLE		□ DEI	ETE 51 THUE	Change Addition
NAME			52 NAME	4h/2b 1
STREET ADDRESS			5.3 STREET ADDRESS	<i> \(\(\)\(\)</i>
CITY-ST-ZIP TITLE		DEL	5.4 CHY-ST-ZIP ETE 6.1 TITLE	Change Addition
NAME		L. 1000	62 NAME	0000 025537 7 0 -06/09/9801123020
STREET ADDRESS			63 STREET ADDRESS	-06/09/9801123020
CITY-ST-ZIP	_		6.4 CITY-ST-ZIP	***150.00
			. 19 ()	11: O - C - 140 07(0)(C) Final Out to 14 de 15 de 16 d

Thereby 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.