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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # P98000017699

1. Corporation Name

HAIR REVOLUTION, INC.

Principal Place of Business

Mailing Address

FILED Apr 07, 1999 8:00 am Secretary of State

04-07-1999 90127 026 ***150.00



		y .			- 1			
9311 ORANGE	9311 ORANGE GROVE DRIVE #							
FORT LAUDERO	UALE FL 33324	FORT LAUDERDALE FL 33324	-		DO NOT WRITE IN THIS S	SPACE		
					3. Date Incorporated or Qualifed			ı
	,							ı
		10 10 11			02/24/1998 4. FEI Number		olied For	ı
	lace of Business	2a. Mailing Address		+ K		<u></u>		Ι.
	7 Powerline Rd	26 12362 NW.	<u>53</u>	<u> </u>	65-08/5792		Applicable	1
Suite, Apt.		Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 A		
22 Pomf	Paro Beach FlA	27 CORBISPRIO	9 S	FIB.		Fee Re	quirea	'
City & State	te	City & State	J.		6. Election Campaign Financing	\$5.00		i
23 37	9 B 9	28 3.3076	··		Trust Fund Contribution	Added to	Fees	į
Zip	Country	Zip	Country	/	8. This corporation owes the current year Inta			l
24	25	29 30			Personal Property Tax.	☐ Yes	□No	l
	9. Name and Address of Current	Registered Agent			10. Name and Address of New Registered A	gent		l
			81	Name	•			l
WAC	CHS, JEFFREY S ESQ		82	 	(D.O. D. M. should Mark A contable)		_	1
1177 S.E. 3RD AVENUE				2 Street Address (P.O. Box Number is Not Acceptable)				
	RT LAUDERDALE FL 33316	•	83	-			_	l
, , , ,	TOOL TOOL				·			l
			84	City		85 Zip C	ode	ł
			^ _ ·		FL		-1-4	ı
11. Pursuant	to the provisions of Sections 607.0502	and 607.1508, Florida Statutes, the	ne abov	e-named corp	poration submits this statement for the purpose of consistency of the purpose of consistency of the purpose of consistency of the consistency of the purpose of consistency of the consi	hanging its tment as red	registered histered	ĺ
oπice or n	registered agent, or both, in the State of im familiar with, and accept the obligation	ons of, Section 607.0505, Florida	Statutes	, и је согрогац 3.	ION & BURN OF GRECOS . THOROUGH GOODE WID OPPORT		,	l
SIGNATURE								l
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable. (NOTE: Regis	stered Age	nt signature require	ed when reinstating) DATE			lά
12.	OFFICERS AND	DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AND	DIRECTO	RS IN 12	11/08
TITLE	PSTD	DELETE	1.1 TITLE	_ F	STD Kreger-FRIS 2362 N.W. 55th St ORAL SPRINGE FIA	Change	☐ Addition	\ `
NAME	KREGER, IRIS		1.2 NAME		Treger LANG			×
STREET ADDRESS		ri 11	1.3 STREE	TADDRESS /	2362 N. W. 35 "SK			غ ا
CITY-ST-ZIP	FORT LAUDERDALE FL 33324		1.4 CITY-S	ST. 2102	DODI SPRINGC FIA	330%	76	٦
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-	2	_	2.2 NAME			•		ĺ
NAME	(
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STREET ADDRESS	1	1	3.3 STREE	T ADORESS				1
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TITLE			4.1 TITLE			Change	Addition	
NAME	i .			1				
STREET ADDRESS			4. 2 NAME					i
SIKEEI AUURESS								
			4.3 STREE	T ADDRESS				
CITY-ST-ZIP			4.3 STREE 4.4 C/TY-S	T ADDRESS		Change	☐ Addition	
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14. 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.

SIGNATURE: