Feb 19, 1999 8:00 am Secretary of State

02-19-1999 90009 043 \*\*\*150.00

## 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 # POROCOCASAN

1. Corporation NAIL &	BODY SPA OF EAST BRAD					
Principal Place of Business		Mailing Address		- 10E11001 149 18161 10111 BAIH 00111 00111 E010	JE BURBO (HIBB IIRIB)	EILLI BIBL IBBI
5907 53RD AVENUE. EAST BRADENTON FL 34208		5907 53RD AVENUE. EAST BRADENTON FL 34208		DO NOT WRITE IN THIS SPACE		
				Date Incorporated or Qualifed		
2.0	N 25	1 2 4 W 2 1 1		06/10/1998		
2. Principal Place of Business		2a. Mailing Address		4. FEI Number		plied For
Suite, Apt. #, etc.		Suite, Apt. #, etc.		65-0841731		Applicable
22		27		5. Certificate of Status Desired		
City & State		City & State		6. Election Campaign Financing Trust Fund Contribution  \$5.00 May Be Added to Fees		
Zip 34	25 Country	Zip 29 34入03 「	Country 30	This corporation owes the current year in Personal Property Tax.		<b>K</b> JNo
	9. Name and Address of Curren			10. Name and Address of New Registered		· · · · · · · · · · · · · · · · · · ·
PRICE, SALLY 5907 53RD AVENUE, EAST BRADENTON FL 34208		81 Name 82 Street Addr 83 84 City	ess (P.O. Box Number is Not Acceptable)	as Zin C	-do	
				FL	85 Zip C	
agent. I a	to the provisions of Sections 607.0502 egistered agent, or both, in the State of familiar with, and accept the obligat	2 and 607.1508, Florida Statute of Florida. Such change was au ions of, Section 607.0605, Flori	s, the above-named corporation in the corporation is the corporation of the corporation in the corporation is the corporation of the corporation in the corporation is the corporation of the corporation in the corporation is the corporation of the corporation in the corporation is the corporation of the corporation in the corporation is the corporation of the corporation in the corporation is the corporation of the corporation in the corporation is the corporation of the corporation in the corporation is the corporation of the corporation in the corporation is the corporation of the corporation in the corporation is the corporation of the corporation in the corporation is the corporation of the corporation of the corporation is the corporation of the corporation of the corporation is the corporation of the corporation o	oration submits this statement for the purpose of on's board of directors. I hereby accept the appo	f changing its reintment as reg	egistered istered
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable. (NOTE:	Registered Agent signature required	d when wisdating) DATE	<u>-77</u>	
12.	OFFICERS ANI		13.	ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTOR	RS IN 12
TITLE	D	☐ DELETE	1.1 TITLE		Change	Addition
NAME	PRICE, SALLY		1.2 NAME			
STREET ADDRESS	6113 26TH AVENUE EAST		1.3 STREET ADDRESS			
CITY-ST-ZIP	BRADENTON FL 34208		1.4 CITY-ST-ZIP	·		
TITLE	D	☐ DELETE	2.1 TITLE		☐ Change	☐ Addition
NAME	SILLIMAN, DONNA		2.2 NAME	·		
STREET ADDRESS	7003 32RD AVENUE EAST		2.3 STREET ADDRESS	,		
CITY-ST-ZIP	BRADENTON FL 34208		2, 4 CITY-ST-ZIP	المعلقة المنظمة المنظم		
TITLE		☐ DELETE	3.1 TITLE		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			
TITLE		☐ DELETE	5.1 TITLE		☐ Change	Addition
NAME			5.2 NAME			
STREET ADDRESS			5.3 STREET ADDRESS			

CITY-ST-ZIP 6.4 CITY-ST-ZIP 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.

5.4 CITY-ST-ZIP

6.3 STREET ADDRESS

6.1 TITLE

6.2 NAME

SIGNATURE:

CITY-ST-ZIP

STREET ADDRESS

TITLE

NAME

☐ DELETE

Change

☐ Addition