**PROFIT** CORPORATION ANNUAL REPORT

1999



## FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P98000062482

KINKZ SALON INC.

## Apr 20, 1999 8:00 am Secretary of State

04-20-1999 90105 042 \*\*\*150.00



Principal Place	e of Business	Mailing Address			T I IPAKTABT IND I GEST I GERT GEFTE GOVER	ABIND RIVING KITIN OTHER	1 (\$170 FLOT (\$0)
6100 APOPKA VINELAND RD. ORLANDO FL 32819		6100 APOPKA VINELAND RD. ORLANDO FL 32819				ı	
					DO NOT WRITE IN	HIS SPACE	
					3. Date Incorporated or Qualifed		j
					06/30/1998		
<del>-</del>	Place of Business	2a. Mailing Address	<del>-</del>		593478038	<b>—</b>	ot Applicable
21		Suite, Apt. #, etc.			3434 1803 8	<del></del>	Additional
Suite, Apt. #, etc.		27			5. Certificate of Status Desired	Fee Re	
City & State		City & State		6. Election Campaign Financing	\$5.00	May Be	
23	_	28			Trust Fund Contribution	Added t	o Fées
Zip	Country	Zip	Co.	untry	\$This corporation owes the current year		=
24	_ 25	29	30		Personal Property Tax.	Yes	□No
	9. Name and Address of Currer	nt Registered Agent			10. Name and Address of New Registe	red/Agent	
	DIEVONI PATIMA			81 Name			}
	PHENSON, KATHRYN			82 Street A	ddress (P.O. Box Number is Not Acceptable)		
	D APOPKA VINELAND RD						
UKL	ANDO FL 32819		•	83			İ
				84 City		85 Zip (	Code
				I I -			
11. Pursuant office or nagent. I at	to the provisions of Sections 607.050 registered agent, or both, in the State im familiar with, and accept the obligations.	02 and 607.1508, Florida Statut of Florida. Such change was a ations of, Section 607.0505, Flo	es, the a uthorized rida Stat	ibove-named or d by the corporations.	orporation submits this statement for the purpos ation's board of directors, I hereby accept the a	e of changing its ppointment as re	registered gistered
						<del>-</del> .	1
SIGNATURE	Signature, typed or printed name of registered age		_ <del>-</del> -		julied when reinstaling) DAT		
SIGNATURE	OFFICERS AN	ND DIRECTORS	13.	d Agent signature req	sufred when reinstalling) DAT ADDITIONS/CHANGES TO OFFICER:	S AND DIRECTO	RS IN 12
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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 of an anaschment with an address, with all other like empowered.