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**PROFIT** CORPORATION ANNUAL RÉPORT 1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## **FILED** Feb 26, 1999 8:00 am Secretary of State

02-26-1999 90041 003 \*\*\*150.00

DOCUMENT # S53313  1. Corporation Name	
LAKESIDE SALON OF BEAUTY, INC.	

Suite, Apt. #, etc.	Principal Plac	MESTEAD BLVD		- LVD			DO NOT W  3. Date Incorporated or Qualific	RITE IN THI		
2. Applied   Source of Business   2. Main Address   2. Main Address   5. Gat S5553   Not Applied   Not Applied   Source   Sourc						1	•			
Suite, Apt. #, etc.   Solidary   Suite, Apt. #, etc.   Solidary   Suite   Suite, Apt. #, etc.   Solidary   Suite, Apt. #, etc.   Solidary   Suite, Apt. #, etc.	2. Principal P	Place of Business	2a. Mailing Address							Applied For
Suite. Apt. #, etc.			<b>├</b> ─			1	65-0325553			Not Applicable
City & State    2    2    2    2    2    2    2	Suite, Apt.	#, etc.	Suite, Apt. #, etc.							
Zip   Country   Zip   Zip   Country   Zip		te					6. Election Campaign Financin	g	\$5.0	0 May Be
28	23		28				Trust Fund Contribution		Adde	ed to Fees
STEELE, BARBARA S. 70 NORTH HONESTEAD BLVD HOMESTEAD FL  11. Pursuant to the provisions of Sections 607.0502 and 807.1508, Floridal Statutes, the above and address of New Registered Agent  14. Pursuant to the provisions of Sections 607.0502 and 807.1508, Floridal Statutes, the above and of directors. I hereby accept the appointment as 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 and familiar with, and accept the obligations of Section 607.6505, Floridal Statutes, the above and application of Sections Such Change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent and familiar with, and accept the obligations of Section 607.6505, Floridal Statutes, the above and the application of Section 607.6505, Floridal Statutes, the above and the application of Section 607.6505, Floridal Statutes, the above and the application of Section 607.6505, Floridal Statutes, the above and the application of Section 607.6505, Floridal Statutes, the above and the application of Section 607.6505, Floridal Statutes, the above and the application of Section 607.6505, Floridal Statutes, the above and the application of Section 607.6505, Floridal Statutes, the above and the application of Section 607.6505, Floridal Statutes, the above and the application of Section 607.6505, Floridal Statutes, the above and the application of Section 607.6505, Floridal Statutes, the above and the application of Section 607.6505, Floridal Statutes, the above and the application of Section 607.6505, Floridal Statutes, the above and the application of Section 607.6505, Floridal Statutes, the above and the application of Section 607.6505, Floridal Statutes, the above and the application of Section 607.6505, Floridal Statutes, the above and the application of Section 607.6505, Floridal Statutes, the above and the application of Section 607.6505, Floridal Statutes, the above and the		Country	Zip	Countr	y		8. This corporation owes the c	urrent year li		_
STEELE, BARBARA S. 70 NORTH HONESTEAD BLVD HOMESTEAD FL 33030  42 City FL 33  44 City FL 35 Test Address (P.O. Box Number is Not Acceptable)  45 Test Address (P.O. Box Number is Not Acceptable)  46 City FL 36 Test Address (P.O. Box Number is Not Acceptable)  47 City FL 36 Test Address (P.O. Box Number is Not Acceptable)  48 City FL 36 Test Address (P.O. Box Number is Not Acceptable)  48 City FL 36 Test Address (P.O. Box Number is Not Acceptable)  49 Test Address (P.O. Box Number is Not Acceptable)  40 Test Address (P.O. Box Number is Not Acceptable)  40 Test Address (P.O. Box Number is Not Acceptable)  41. Pursuant to the provisions of Sections 607.1508. Floridal Statutes.  41. Pursuant to the provisions of Sections 607.1508. Floridal Statutes the above-named corporation submits this statement for the purpose of changing its register of the provisions of the provi	24	25	29	30						UNo
STEELE, BARBARA S. 70 NORTH HONESTEAD BLVD HOMESTEAD FL 33030  42 Street Address (P.O. Box Number is Not Acceptable)  43 City  FL 85 Zip Code  44 City  FL 85 Zip Code  45 City  FL 85 Zip Code  46 City  FL 85 Zip Code  47 City  FL 85 Zip Code  48 City  FL 85 Zip Code  49		9. Name and Address of Current	t Registered Agent				10. Name and Address of Nev	v Registered	d Agent	
TO NORTH HONESTEAD BLVD HOMESTEAD FL 33030  82 Street Address (P.O. Box Number is Not Acceptable)  83   24 City   FL   85   Zip Code  84 City   FL   85   Zip Code  85   Zip Code  86   City   FL   85   Zip Code  87   City   FL   85   Zip Code  88   Zip Code  89   City   FL   85   Zip Code  80   City   FL   85   Zip Code  80   City   FL   85   Zip Code  81   City   FL   85   Zip Code  82   City Sip City   City	AT-	ELE BARRADA C		8	1 Nam	e			•	
HOMESTEAD FL 33030    83				8	2 Stree	et Addres	s (P.O. Box Number is Not Acce	ptable)	***	
T1. 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 or gentlered 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 and text a special familiar with, and accept the obligations of, Section 607 0505, Florida Statutes.  SIGNATURE  SIGNATURE  12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN TIME 12 A										
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 regist of corregistered 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, 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 and accept the obligations of, Section 607.0505, Florida Statutes.  SIGNATURE  SIGNATURE  SIGNATURE  OFFICERS AND DIRECTORS IN INTERESTITE TO THE PROPRIET OF PROPRIET OF PROPRIET OF PROPRIET OF INTERESTITE OF PROPRIET O	HOM	MESTEAD FL 33030		8	3					
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 regist 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, 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 and accept the obligations of, Section 607.0505, Florida Statutes.    SIGNATURE				8	4 City				85 Z	ip Code
SIGNATURE  12. OFFICERS AND DIRECTORS  TILE  D					1					
TITLE										
TITLE STREET ADDRESS OTY-ST-ZIP HOMESTEAD BLVD	SIGNATURE	Signature, typed or printed name of registered agent	t and title if applicable. (NOTE	: Registered Ag			hen reinstating)	DATE		<del></del>
STREET ADDRESS   70 N HOMESTEAD BLVD   1.3 STREET ADDRESS	SIGNATURE	Signature, typed or printed name of registered agent	t and title if applicable. (NOTE D DIRECTORS	Registered Ag	ent signatu		hen reinstating)	DATE	ND DIREC	TORS IN 12
CITY-ST-ZIP	SIGNATURE  12.  TITLE	Signature, typed or printed name of registered egen OFFICERS AN	t and title if applicable. (NOTE D DIRECTORS	13.	ent signatu		hen reinstating)	DATE	ND DIREC	TORS IN 12
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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.

SIGNATURE:

305-245-1555