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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortnam Secretary of State DIVISION OF CORPORATIONS

1996

Corporation Name	NT # ぷら7								
U. S.	HAIR, INC.								
ncipal Place of Bu	usiness	Madir	ng Address						
	. Lantana	Rd							
						3. Date Incorporated or Qualified	3a. Date of La	ast Report	
Lantan	na, fila	33462	S			06/04/1991	06/01	/199	4
			Mailing Address			4. FEI Number		Appli	ed For
Principal Place o	of Business	2a. N	naming Address			65-0277905		Not A 3.75 Add	Applicable Hitional
Suite, Apt. #, etc	<u> </u>		Suite, Apt #, etc			5. Certificate of Status Desired		Fee Requ	
auite, Apr. #. etc	u .	27				6. Election Campaign Financing	<u> </u>	5.00 M	ay Be
City & State			City & State			Trust Fund Contribution		Added to I	Fees
		28	Zip	Country	y	8. This corporation has liability for in	ntangible tax t	under s 1	99.032.
Ziρ	Country	29	E-IP	30		Florida Statules LJ Yes	f"] No		
l	25 Name and Address o		ered Agent		1.	10. Name and Address of New Re	Aleceien with		
			DELET	E 81	1 104	EREDITH, MARY ANN			
MAKEMA	N. MARYLL	<u></u>		82		rs o D+ Mumber is Not Acceptati	#303C	<u>. </u>	
101 N.	MONROEST			B3	320	0 SO OCEAN BLVD -			
SHITE	900		-	65	PAI	M BEACH		5 Zip Ci	ode
TALLAH	HASSEE, FLA				4 City		- Fi 1	33	480
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			37 4500 Eleveda Cta	Į.	,	poration submits this statement for the p	ourpose of chi	anging its Iment as ri	registered egistered
1. Pursuant to th	ne provisions of Sections	607.0502 and 60	07 1508, Florida Sta da Such change wa	itutes the abo	ve-named cor by the corpora	poration submits this statement for the pation's board of directors. I hereby accept	purpose of chapt the appoint	anging its Iment as ri	reg stered egistered
11. Pursuant to the office or regis agent. I am ta	ne provisions of Sections stered agent, or both, in amiliar with, and accept	607.0502 and 60	07 1508, Florida Sta la Such change wa , Section 607 0505.	itutes the abo	ve-named cor by the corpora	poration submits this statement for the pation's board of directors. Thereby accepts the statement for the pation's board of directors. Thereby accepts the statement for the patients are statement for the patients ar	ourpose of chapt the appoint of - 5-9	anging its tment as ri	reg stereo egistereo
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made under oath, that I am an officer or director of the corporation or the receiver or trustee empowered to execute this rethat my name appears in Block 12 or Block 13 if changed, or on an attachment with an address

SIGNATURE: Mary Can Describ — MARRY An MERBOTH

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR