05131999-90020-039-$150.00-$150.00

04/28/99 14:04 FAX 13056701077 NIDMARA LEE

FILED
May 13, 1999 8:00 am
Secretary of State
05-13-1999 90020 039 ***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 # S59408

1. Corporation Name
Yanuni INC.
FORMA HAIR DESIGNERS.

Principal Place of Business — Mailing Address

DO NOT WRITE IN THIS SPACE

2. Date Incorporated or Qualified: 11/12/1993

2. Principal Place of Business: 21 10521 N. KENDALL DR.
Suite, Apt. #, etc.
City & State: 23 MIAMI, FL
Zip: 24 33176 Country: 25 U.S.A.

2a. Mailing Address: 26 10521 N. KENDALL DR.
Suite, Apt. #, etc.: 27
City & State: 28 MIAMI FL
Zip: 29 33176 Country: 30 U.S.A.

4. FEI Number: 65-0313237 — Applied For / Not Applicable

5. Certificate of Status Desired — $8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution — $5.00 May be Added to Fees

7. This corporation owes the current year Intangible Personal Property Tax. ☐ Yes ☐ No

8. Name and Address of Current Registered Agent
JULIO CRUZ
40 YANUNI INC. DBA
FORMA HAIR DESIGNERS
10521 N. KENDALL DRIVE #E-104
MIAMI FL. 33176
Julio Cruz

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City — FL — 85 Zip Code

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 registered 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. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: Julio Cruz — 5-31-99
Signature of a member of the Board of Directors or Trustees and title if applicable — (NOTE: Registered Agent signature required when applicable) — DATE

12. OFFICERS AND DIRECTORS

TITLE	President.
NAME	Julio Ruiz.
STREET ADDRESS	10521 N. KENDALL DR.
CITY-ST-ZIP	MIAMI, FL. 33176.

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

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.

Julio Cruz