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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # S72045

(5)

THE SALON OF WESTON, INC.

FILED
May 01 1998 8:00am
Secretary of State



| Principal Place | of Business | Mailing Address | 3 | | | 1 | | |
|--|--|---------------------------------------|---------------------|--|--|---|---------------------|--|
| 676 W PROSP | | 676 W PROSPE | CT RD | | | | | |
| FT LAUDERDA | | FT LAUDERDAL | E FL 33309 | } | | DO NOT WOLT | E IN THIS SPACE | : |
| | | | | | | 3. Date Incorporated or Qualified | | - |
| | | | | | | 08/09/1991 | | |
| 2. Principal Pla | ace of Business | 2a. Mailing Addr | ess | | | 4. FEI Number | | Applied For |
| 1 | | 26 | <u>}</u> , | | | 65-0283647 | | Not Applicable |
| Sulte, Apt. #, etc. | | | Suite, Apt. #, etc. | | | 5. Certificate of Status Desired | □ \$8 | .75 Additional |
| 2 | | 27 | 27 | | | 5. Certificate of Status Desired | Ч г | ee Required |
| City & State | | City & State | | | | 6. Election Campaign Financing | \$5 | 5.00 May Be |
| 23 | | 28 | | | | Trust Fund Contribution | | dded to Fees |
| Zip | Country | Zip | - | Country | | 8. This corporation owes or has p | | <i></i> |
| 4 | 25 | [29] | 1 | 30 | | Personal Property Tax due Jun | | 177 |
| | | of Current Registered Agent | | 81 | Marra | 10. Name and Address of New R | egistered Agent | <i>V</i> \ |
| | AVES, CHERYL | | | *' | Name | | | |
| - | W PROSPECT RD | _ | | | Street Add | dress (P.O. Box Number is Not Acceptable) | | |
| FT | L aud erdale Fl 33309 | 9 | | - | | | | |
| | | | | 83 | | | | |
| | | | | 84 | City | | 85 | Zip Code |
| | | | | | | poration submits this statement for the | FL " | |
| SIGNATURE | | the obligations of, Section 607 | | | | | DATE | |
| | Signature, typed or printed name of i | regedured agent and the if applicable | (NOTE: | Registered Age | | | | |
| | OFC | OCOP AND DIDLOTODE | | | nt signature requ | | | CTORS IN 12 |
| 12. | _ | CERS AND DIRECTORS | | 13. | ent signature requ | ADDITIONS/CHANGES TO OFF | ICERS AND DIRE | |
| 12. TIFLE | PD | | ELETE | 13. 1.1 TITLE | nt signature requ | | | |
| 12. TITLE | PD Graves, Cheryl | [] D | | 13. 1.1 TITLE 1.2 NAME | | | ICERS AND DIRE | |
| 112. TITLE NAME STREET ADDRESS | PD GRAVES, CHERYL 676 W PROSPECT R | [] D | | 13. 1.1 TITLE 1.2 NAME 1.3 STREET | ADDRESS | | ICERS AND DIRE | |
| 12. Title Name Street address City-St-Zip | PD Graves, Cheryl | D D | ELETE | 13. 1.1 TITLE 1.2 NAME 1.3 STREET 1.4 CITY-S | ADDRESS | | ICERS AND DIRE | nange Addition |
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