

**FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00**

**CORPORATION  
ANNUAL REPORT  
1995**



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

APPROVED  
AND  
FILED

95 MAY -1 PM 2:36

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**DOCUMENT # V02745 (0)**

1. Corporation Name  
**NOW HAIR & NAILS, INC.**

DO NOT WRITE IN THIS SPACE.

Principal Place of Business      Mailing Address  
**C/O HAIR-O-DYNAMICS  
3185 S. FEDERAL HWY  
DELRAY BEACH FL 33483  
US**                                      **C/O HAIR-O-DYNAMICS  
3185 S. FEDERAL HWY  
DELRAY BEACH FL 33483  
US**

3. Date Incorporated or Qualified      3a. Date of Last Report  
**12/27/1991**                                      **05/24/1994**

2. Principal Place of Business      2a. Mailing Address  
**3185 So Fed Hwy**                                      **same**

4. FEI Number      Applied For  
**NOT APPLICABLE**                                      **Not Applicable**

22. Subj. Apt. #, etc.      27. Subj. Apt. #, etc.  
**Delray Beach FL**                                     

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

23. City & State      28. City & State  
**33483**                                     

6. Election Campaign Financing Trust Fund Contribution      \$5.00 May Be Added to Fees  
                                     

24. Zip      25. Country      29. Zip      30. Country  
      **P.B.**                                           

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes      Yes  No

9. Name and Address of Current Registered Agent  
**VERA, VIRGINIA  
5580 A-N FEDERAL HIGHWAY  
BOCA RATON FL 33487**

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

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, Sections 607.0505, Florida Statutes.

SIGNATURE *Virginia Vera*      DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	<b>P</b>	1. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>VERA, VIRGINIA</b>	2. NAME	
STREET ADDRESS	<b>5580 A-N FEDERAL HWY</b>	3. STREET ADDRESS	
CITY - ST - ZIP	<b>BOCA RATON FL</b>	4. CITY - ST - ZIP	
TITLE	<b>V</b>	21. TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>VERA, VIRGINIA</b>	22. NAME	<i>not here since 1993</i>
STREET ADDRESS	<b>3185 S. FEDERAL HWY</b>	23. STREET ADDRESS	
CITY - ST - ZIP	<b>DELRAY BEACH FL 33483</b>	24. CITY - ST - ZIP	
TITLE		31. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		32. NAME	
STREET ADDRESS		33. STREET ADDRESS	
CITY - ST - ZIP		34. CITY - ST - ZIP	
TITLE		41. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		42. NAME	
STREET ADDRESS		43. STREET ADDRESS	
CITY - ST - ZIP		44. CITY - ST - ZIP	
TITLE		51. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		52. NAME	
STREET ADDRESS		53. STREET ADDRESS	
CITY - ST - ZIP		54. CITY - ST - ZIP	
TITLE		61. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		62. NAME	
STREET ADDRESS		63. STREET ADDRESS	
CITY - ST - ZIP		64. CITY - ST - ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), 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.

**SIGNATURE:**      DATE