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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT #

(6)

POINT EAST BEAUTY SALON, INC.

APPROVED AND FILED

96 JAN 23 AM 8: 44

SECRETARY OF STATE TALLAHASSEE, FLORIDA



| 1 | e of Business | Mailing Address | | | | AN TINI MININ MENH MENIN NIN | er minnt mittig 1461 |
|--|--|--------------------------|--|--|--|--|---------------------------------------|
| 17951 BISCAYNE BLVD 17951 BISCAYNE I N MIAMI BEACH FL 33160 N MIAMI BEACH F | | | | | | | |
| 6 F. 100 (100 F) | , | | | | 3. Date Incorporated or Qualified 06/02/1992 | 3a. Date of Last F 09/25/19 | , |
| 2. Principal Pi | tace of Business | 2a. Mailing Address | | | 4. FEI Number | | Applied For |
| Suite, Apt. | #. etc. | Suite, Apt. #, etc | | | 65-0338722 | | Not Applicable |
| 22 | | 27] | | | 5. Certificate of Status Desired | | 5 Additional Required |
| City & Stati | | City & State | | | 6. Election Campaign Financing Trust Fund Contribution | | 00 May Be ed to Fees |
| Ζιρ [24] | Country | Ζρ | Cou | ntry | 8. This corporation has liability for i | | 199.032, |
| [24] | 25 9. Name and Address of Curre | 29 | [30] | | | □No | |
| | a, Hame uno Adoress of Culfe | ant negistered Agent | | 81 Nar | 10. Name and Address of New R | egistered Agent | |
| QTEINI | HICV | | | 142 | | | |
| STEIN, LUCY 17951 BISCAYNE BLVD | | | | | eet Address (P.O. Box Number is Not Acceptable | le) | · · · · · · · · · · · · · · · · · · · |
| N MIAN | AI BEACH FL 33160 | | | B3 | | | |
| 1 | 1 | | | 84 City | / | 85 Z | p Code |
| 11 Pursuanti | to the provisions of South of South | 1 Julion 1500 Florida Co | | | d corporation submits this statement for the purp in's board of directors. I hereby accept the appo | 1-1 1 | • |
| S'GNATURE | Mulitarie typed or prided name of registered ag- | nd and the diapphosphe | (NCITE: Registered | | ure required when reinstating) | 1/19/96 DATE | |
| TOUE | D OFFICEAS AI | ND DIRECTORS | 13. | | ADDITIONS/CHANGES TO OFFI | | |
| ,, (, | • | | 1, 1 1 | ILE | | ☐ Change | Add-tion |
| NAMi | STEIN HICV | | 1.000 | . ar | | _ · | |
| NAMI STREFT ADDRESS | STEIN, LUCY 17951 RISCAYNE RI VD | | 1.2 NA | | 300i | _ · | 7843 |
| STREET ADDRESS | 17951 BISCAYNE BLVD | | 13 ST | REET ADDRE | ss 300: -02/06. | no 1 707 29601089- | 7843 002 |
| | | [] DELFTE | 13 STI | REET ADDRE Y-ST-ZIP | ss 300i -02/06. | no 1 707 29601089- | 7843 002 -200.00 |
| STREAT ADDRESS | 17951 BISCAYNE BLVD N MIAMI BEACH FL D | [] OELETE | 13 ST | REET ADDRE Y-ST-ZIP ILE | ss 300i -02/06. *****20 | _ · | 7843 002 200.00 |
| STREET ADDRESS CITY - ST - ZIP TITLE | 17951 BISCAYNE BLVD N MIAMI BEACH FL | □ OELETE | 1 3 STI 1 4 CIT 2 1 TI 2 2 NA | REET ADDRE Y-ST-ZIP ILE | **** | no 1 707 29601089- | 7843 002 200.00 |
| SIRE/TADDRESS CITY-SE-ZIF THUE NAME | 17951 BISCAYNE BLVD N MIAMI BEACH FL D STEIN, SLAB | [] OELETE | 1 3 STI 1 4 CIT 2 1 TI 2 2 NA 2 3 STE | REET ADDRE Y-ST-ZIP TLE ME | **** | no 1 707 29601089- | 7843 002 200.00 |
| STREET ADDRESS CITY - ST- ZIP THE NAME STREET ADDRESS CITY ST- ZIP HTTLE | 17951 BISCAYNE BLVD N MIAMI BEACH FL D STEIN, SLAB 17951 BISCAYNE BLVD | □ DELETE | 1 3 STI 1 4 CIT 2 1 TI 2 2 NA 2 3 STE | REET ADDRE Y-ST-ZIP TLE ME REET ADDRE Y-ST-ZIP | **** | no 1 707 29601089- | 7843 -002 200_00 Addition |
| STREET ADDRESS CITY - ST- ZIP THE NAME STREET ADDRESS CITY ST- ZIP HILE NAME | 17951 BISCAYNE BLVD N MIAMI BEACH FL D STEIN, SLAB 17951 BISCAYNE BLVD | | 13 STI 14 CIT 2 1 TI 22 NA 23 STE 24 CIT | REET ADDRE Y-ST-ZIP TLE ME REET ADDRE Y-ST-ZIP TLE | **** | □□17□ /9601089- 00.00□ *** * | Addition |
| STREET ADDRESS CITY-SE-ZIP THE NAME STREET ADDRESS CITY ST-ZIP HOLE NAME STREET ADDRESS | 17951 BISCAYNE BLVD N MIAMI BEACH FL D STEIN, SLAB 17951 BISCAYNE BLVD | | 13 STI 14 CII 2 1 TI 22 NA 23 STE 24 CII 3.1 TII 32 NAI | REET ADDRE Y-ST-ZIP TLE ME REET ADDRE Y-ST-ZIP TLE | SS ####21 | □□17□ /9601089- 00.00□ *** * | Addition |
| STREET ADDRESS CITY SETZIE THE NAME STREET ADDRESS CITY STATE HITE NAME STREET ADDRESS CITY STATE CITY STATE OF THE TREET ADDRESS CITY SETZIE | 17951 BISCAYNE BLVD N MIAMI BEACH FL D STEIN, SLAB 17951 BISCAYNE BLVD | [] DELETE | 13 STI 14 CII 2 1 TI 22 NA 23 STI 24 CII 3.1 TII 32 NAI 33 ST 34 CII | REET ADDRE Y-ST-ZIP TLE ME REET ADDRE: Y-ST-ZIP TLE ME REET ADDRE: REET ADDRE | SS ####21 | | Addition |
| STREET ADDRESS CITY-SE-ZIP THE NAME STREET ADDRESS CITY SY-ZIP HOLE NAME STREET ADDRESS CITY-SY-ZIP HOLE NAME STREET ADDRESS CITY-ST-ZIP HOLE | 17951 BISCAYNE BLVD N MIAMI BEACH FL D STEIN, SLAB 17951 BISCAYNE BLVD | | 13 STI 14 CIT 2 1 TI' 22 NA 23 STE 24 CIT 3. 1 TII 32 NAI 33 ST 34 CIT 4 1 TII | REET ADDRE Y-ST-ZIP TLE ME REET ADDRES Y-ST-ZIP TLE ME REET ADDRES PLE REET ADDRES Y-ST-ZIP LE | SS ####21 | □□17□ /9601089- 00.00□ *** * | Addition |
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| STREET ADDRESS CITY-SE-ZIP THE NAME STREET ADDRESS CITY SY-ZIP HOLE NAME STREET ADDRESS CITY-SE-ZIP HOLE NAME STREET ADDRESS | 17951 BISCAYNE BLVD N MIAMI BEACH FL D STEIN, SLAB 17951 BISCAYNE BLVD | [] DELETE | 13 STI 14 CIT 2 1 TI' 22 NA 23 STI 24 CIT 3. 1 TII 32 NAI 33 ST 34 CIT 4 1 TII 42 NAI 43 STI | REET ADDRE Y-ST-ZIP ILE ME KEET ADDRE ILE ME HEET ADDRE HEET ADDRE HEET ADDRE HEET ADDRE | \$\$ \$\$ | | Addition |
| STREET ADDRESS CITY-SE-ZIP TITE NAME STREET ADDRESS CITY SY-ZIP TITE NAME STREET ADDRESS CITY-ST-ZIP TITE THE TREET ADDRESS | 17951 BISCAYNE BLVD N MIAMI BEACH FL D STEIN, SLAB 17951 BISCAYNE BLVD | [] DELETE | 13 STI 14 CIT 2 1 TI' 22 NA 23 STI 24 CIT 3. 1 TII 32 NAI 33 ST 34 CIT 4 1 TII 42 NAI 43 STI | REET ADDRE Y-ST-ZIP TUE ME REET ADDRE: Y-ST-ZIP TUE ME REET ADDRE Y-ST-ZIP TUE ME REET ADDRE KEET ADDRE Y-ST-ZIP | \$\$ \$\$ | | Addition Addition |
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| STREET ADDRESS CITY-SE-ZIP TITLE NAME STREET ADDRESS CITY-SY-ZIP TITLE NAME STREET ADDRESS CITY-SE-ZIP TITLE | 17951 BISCAYNE BLVD N MIAMI BEACH FL D STEIN, SLAB 17951 BISCAYNE BLVD | DELETE | 1 3 STI 1 4 CII 2 1 TI' 2 2 NA 2 3 STI 2 4 CII 3 1 TII 3 2 NAI 3 3 ST 3 4 CII 4 1 TII 4 2 NAI 4 3 STI 4 4 CII 5 1 TII 5 2 NAI | REET ADDRE Y-ST-ZIP TUE ME | SS *********************************** | | Addition Addition |
| STREET ADDRESS CITY-SE-ZIP TITE NAME STREET ADDRESS CITY-ST-ZIP TITE NAME STREET ADDRESS CITY-SE-ZIP | 17951 BISCAYNE BLVD N MIAMI BEACH FL D STEIN, SLAB 17951 BISCAYNE BLVD | DELETE | 13 STI 14 CII 2 1 TI 22 NA 23 STI 24 CII 3.1 TII 32 NAI 33 ST 44 CII 41 TII 51 TII 52 NAI 53 STE | REET ADDRE Y-ST-ZIP TLE ME REET ADDRE Y-ST-ZIP LE ME | SS *********************************** | | Addition Addition |
| STREET ADDRESS CITY-SE-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-SE-ZIP TITLE | 17951 BISCAYNE BLVD N MIAMI BEACH FL D STEIN, SLAB 17951 BISCAYNE BLVD | DELETE | 13 STI 14 CII 2 1 TI 22 NA 23 STI 24 CII 3.1 TII 32 NAI 33 ST 44 CII 41 TII 51 TII 52 NAI 53 STE | REET ADDRE Y-ST-ZIP TLE ME REET ADDRE Y-ST-ZIP LE ME REET ADDRE Y-ST-ZIP | SS *********************************** | | Addition Addition |
| STREET ADDRESS CITY SETZIE THE NAME STREET ADDRESS CITY STATE HAME | 17951 BISCAYNE BLVD N MIAMI BEACH FL D STEIN, SLAB 17951 BISCAYNE BLVD | ☐ DELETE | 1 3 STI 1 4 CIT 2 2 NA 2 3 STI 2 4 CIT 3 1 TIT 3 2 NA 3 3 ST 3 4 CIT 4 1 TIT 4 2 NAI 4 3 STI 4 4 CIT 5 1 TIT 5 2 NAI 5 3 STI 5 4 CIT | REET ADDRES Y-ST-ZIP TLE ME | SS *********************************** | 1 7 7 7 7 7 96 0 1 0 0 0 0 0 0 0 0 | Addition Addition Addition |
| STREET ADDRESS CITY-SE-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-SE-ZIP TITLE | 17951 BISCAYNE BLVD N MIAMI BEACH FL D STEIN, SLAB 17951 BISCAYNE BLVD | ☐ DELETE | 13 STI 14 CII 2 1 TI 22 NA 23 STI 24 CII 3.1 TII 42 NAI 43 STI 44 CII 5 1 TII 5 2 NAI 5 3 STI 5 4 CII 6 1 TII | REET ADDRES Y-ST-ZIP TLE ME | \$\$\$ \$\$\$ | 1 7 7 7 7 7 96 0 1 0 0 0 0 0 0 0 0 | Addition Addition Addition |

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 ecopier 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 or an attraction of the ecopier or trustee empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name

SIGNATURE:

ITED NAME OF SIGNING OFFICER OR DIRECTOR