FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

APPROVED AND FILED

1995

DOCUMENT # V72498 (1)

1 THE PLAZA HAIR PLACE, INC.

1647 NE 8TH ST
HOMESTEAD FL 33030
US

1555 NW 15 AVENUE
HOMESTEAD FL 33030
US

2

21

22

23

24 25

2a

26

27

28

29 30

3 10/20/1992

3a 05/01/1994

4 65-0239736

5 $8.75 Additional Fee Required

6 $5.00 May Be Added If Filed

8 X

9 Name and Address of Current Registered Agent

CORPORATION INFORMATION SERVICES INC.
1201 HAYS STREET
TALLAHASSEE FL 32301

10 Name and Address of New Registered Agent

81

82

83

84

FL 85

11

12

PDS
RAMOS, BRUNILDA
1555 NW 15TH AVE
HOMESTEAD FL

13 X

33030

AP 6/2

14

SIGNATURE: (X)

0110470 CP

FILE NOW: Fee after May 1, will be $263.75

APPROVED
AND
FILED

95 JUN -1 AM 9:23

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

LIMITED LIABILITY COMPANY
ANNUAL REPORT
1995

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

FILING FEE $ 238.75 — Annual Report $100.00 + $138.75 Corporation Supplemental Fee
Make Check Payable To: FLORIDA DEPARTMENT OF STATE

1. Name and Mailing Address of Limited Liability Company — **DOCUMENT #** [illegible]

INTERDEVCO PROJECTS, L.C.
10560 NW 27th Street
Suite 101
Miami, Florida 33172

If above mailing address is incorrect in any way, line through incorrect information and enter correction in Block 2

1a. Principal Place of Business Address

10560 NW 27th Street
Suite 101
Miami, Florida 33172

2. Mailing Address
Suite, Apt #, etc
City & State
Zip

2a. Principal Place of Business
Suite, Apt #, etc
City & State
Zip

3. Date Organized or Qualified: 1/17/90

3a. State of Formation: Florida

4. FEI Number: 65-0287392 — ☐ Applied For ☐ Not Applicable

5. Date of Last Report: 6/1/94

6. Certificate of Status Desired — $8.75 Additional Fee Required ☑

7. Name and Address of Current Registered Agent

Jose Maria Suriol
10560 NW 27th Street
Suite 101
Miami, Florida 33172

8. Name and Address of New Registered Agent
Name
Street Address (P.O. Box Number Is Not Acceptable)
Suite, Apt #, etc
City — **FL** — Zip Code

9. Pursuant to the provisions of Sections 608.416 and 608.508, Florida Statutes, the above named limited liability company 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 affirmative vote of a majority of the members. I hereby accept the appointment as registered agent and accept the obligations.

SIGNATURE ______ DATE May 17, 1995

10. Title	Managing Members/Managers	Business Street Address	City, State and Zip Code
MGMB	Suriol, Jose Maria	10560 NW 27th St. # 101	Miami, Florida 33172
Member	Dalal, Roger	10560 NW 27th St. # 101	Miami, Florida 33172

100001505711
-06/06/95--01003--016
****272.50 ****272.50

11. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes; and that my name appears in Block 10, or on an attachment with an address.

SIGNATURE: ______ Jose M. Suriol May 17, 1995 (305) 599-0374

INHSE10 R(12/94)