

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

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OFFICE OF THE SECRETARY OF STATE
 CORPORATION AND BUSINESS REGISTRATION
 STATE OF FLORIDA
 VISITOR REGISTRATION

FILED

97 AUG 29 PM 4:06

SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

DOCUMENT # **623654**
 1. Corporation Name: **S2 Investments**

Principal Place of Business: **Stars Hair Salon**
 Mailing Address: **7262 W. Colonial Dr
 Orlando FL 32818**

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3. Date Incorporated or Qualified Dec. '89	3a. Date of Last Report
4. FEI Number 59-2989436	Applied For or Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent
**SUSAN SCOTT
 3235 Hidden Lakes Dr.
 Winter Garden FL 34787**

10. Name and Address of New Registered Agent
B1 Name
B2 Street Address (P.O. Box Number is Not Acceptable)
B3
B4 City
B5 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: *Susan Scott* (607) Registered Agent Signature (required when registering) DATE: **8-1-97**

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	President	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Jeff Scott	1.2 NAME	
STREET ADDRESS	3235 Hidden Lakes Dr.	1.3 STREET ADDRESS	
CITY-ST-ZIP	Winter Garden FL 34787	1.4 CITY-ST-ZIP	
TITLE	Vice President	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Steve Sheffer	2.2 NAME	
STREET ADDRESS	7315 Everglades Court	2.3 STREET ADDRESS	
CITY-ST-ZIP	Orlando FL 32819	2.4 CITY-ST-ZIP	
TITLE	Treasurer	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Susan Scott	3.2 NAME	
STREET ADDRESS	3235 Hidden Lakes Dr.	3.3 STREET ADDRESS	
CITY-ST-ZIP	Winter Garden FL 34787	3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

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8-29-97

14. I do 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.

SIGNATURE: *Susan Scott* SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR: **Susan Scott** DATE: **8-1-97** DAYTIME PHONE #: **407-292-7939**

CR2E034 (9/96)

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S2 Investments Incorporated
7262 W Colonial Dr
Orlando, FL 32818

July 7, 1997

Florida Department of State
Division of Corporations
P O Box 6327
Tallahassee, FL 32314

L23054

Ref: S2 Investments Incorporated (1-20654)

To Whom It May Concern:

We are writing in regards to your letter dated May 29, 1997 (see attached) and in reference to several telephone conversations with your office.

It appears as though you did not have a correct or complete address for our business and hence did not receive the Annual Reports for 1995 or 1996. Hence, we did not receive the Annual Reports for these years. We had a new Accountant, Mr. Al H. Desai from Comprehensive Business Services who had advised us to complete a blank 1996 Annual Report and pay the fee of \$165.00. However, as per your above-mentioned letter, our Corporation has been dissolved due to non-payment of the Annual Fees.

Under penalties of perjury, we would like to state that to the best of our knowledge and belief, we did not receive any correspondence from your office re the Annual Fees and we had relied solely on our Accountant to handle all such matters.

Therefore, at this stage, we are kind fully and respectfully requesting that our Corporation be reinstated as soon as possible with any further penalties. We are enclosing a check for \$365.00 which represents the 1995 Fee of \$200.00 and the 1996 Fee of \$165.00.

Please do not hesitate to contact us or our Accountant, Mr. Al Desai at (407)345-0007 if you have any questions or need further help in this matter.

Sincerely,

Jeff Scott
President