FILED

2001 UNIFORM BUSINESS REPORT (UBR)

Aug 01, 2001 8:00 am Secretary of State P00000116261 DOCUMENT # 1. Entity Name SENSATIONAL YOU, INC. 08-01-2001 90191 039 ***150.00 Principal Place of Business Mailing Address 5te 105 R STE 105-R 4400 PGA BLVD 4400 PGA BLVD PALM BEACH GARDENS FL 33410 PALM BEACH GARDENS FL 33410 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number 65-1075768 Not Applicable Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name SWAFFORD, SUSAN Street Address (P.O. Box Number is Not Acceptable) 4400 PGA BLVD PALM BEACH GARDENS FL 33410 City Zip Code FL 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. DATE (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$550.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After September 12, 2001 Fee will be \$750.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 11. TITLE Delete TITLE NAME SWAFFORD, SUSAN NAME 15720 JUPITER FARMS RD STREET ADDRESS STREET ADDRESS CITY-ST-ZIP JUPITER FL 33478 CITY-ST-ZIP Change Addition TITLE ☐ Delete TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition TITLE ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Change ■ Addition TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP Change ☐ Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP ☐ Addition TITLE ☐ Delete TITLE Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP 13. I 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other life empowered.

SIGNATURE:

NATURE AND TYPED OF PRINTED NATURE OF SIGNING OFFICER OR DIREC

7-11-01

561-799-97a

SENSATIONAL YOU, INC. BOUGORGE

4400 PGA Boulevard, Suite 105-R Palm Beach Gardens, FL 33410 (561) 799-9700 Facsimile (561) 9694-1299

July 11, 2001

Division of Corporations State of Florida Uniform Business Report Filings PO Box 1500 Tallahassee, FL 32302-1500

Re: Sensational You, Inc.

Uniform Business Report Filings

Dear Sirs:

Pursuant to my telephone conversation with your office this date, this is to confirm and reiterate that I did not get anything from your office concerning the filing of the Uniform Business Report for the year 2001.

Accoringly, pursuant to your instuctions, I have completed the Uniform Business Report for the year 2001 (as received this date from your office) and have enclosed same together with a check for \$150.00 as the required filing fee pursuant to your instructions.

Thank you for your time in this regard. Should you have any questions or problems with this report, however, please feel free to contact the undersigned at the address or telephone shown above.

Very truly yours,

SENSATIONAL YOU, INC., d/b/a A Current Look

SUSAN SWAFFORD

President

Enclosures: As Above