

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000062581

FILED
Apr 30, 2007
Secretary of State

Entity Name: MAKE UP BY L INC.

Current Principal Place of Business:

P O BOX 110
DEERFIELD BEACH, FL 33443110

New Principal Place of Business:

269 DIXIE HIGHWAY
DEERFIELD BEACH, FL 33441

Current Mailing Address:

P O BOX 110
DEERFIELD BEACH, FL 33443110

New Mailing Address:

FEI Number: 71-0981400 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROJAS, LISETTE
5630 NW 55TH BLVD
204
COCONUT CREEK, FL 33073 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: ROJAS, LISETTE
Address: P O BOX 110
City-St-Zip: DEERFIELD BEACH, FL 33443110

Title: VP () Delete
Name: BENJAMIN, LEANNA
Address: P O BOX 110
City-St-Zip: DEERFIELD BEACH, FL 33443110

Title: S () Delete
Name: BENJAMIN, LEAYLE
Address: P O BOX 110
City-St-Zip: DEERFIELD BEACH, FL 33443110

Title: T () Delete
Name: BAILEY, FAYE
Address: P O BOX 110
City-St-Zip: DEERFIELD BEACH, FL 33443110

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LISETTE ROJAS

PRES

04/30/2007

Electronic Signature of Signing Officer or Director

_____ Date