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

Mailing Address
SUNBERRY CIRCLE

BOYNTON BCH FL 33437-3309

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business

2151 ALT A1A S SUITE 450

JUPITER FL 33477

SIGNATURE:



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P93000017731 (9)

ABOUT FACE & BODY, INC.

US 3. Date Incorporated or Qualified 3a. Date of Last Report 3108 03/09/1993 02/05/1996 2. Principal Place of Business 2a. Mailing Address 4, FEI Number Applied For 65-0403923 21 26 Not Applicable Suite Apt #, etc Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 5. Election Campaign Financing 23 28 Trust Fund Contribution Adde I to Fees Ζιρ Country Zø Country 8. This corporation has liability for intangible tax wider s. 199.032, Yes 24 Florida Statutes . No 25 29 30 g. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name CARBONE, VIRGINIA C 6012 SUNBERRY CR. 82 Street Address (P.O. Box Number is Not Acceptable) **BOYNTON BEACH FL 33437** 83 84 Zip Code 11. Pursuant to the previsions 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 Segration hyperactiph modificant of registered agent and fille happlicable (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. OP DELETE Change Addition Title 1 1 TITLE CARBONE VIRGINIA COLOMBI NAME 1.2 NAME 6012 SUNBERRY CIR. STREET ADDRESS 1.3 STREET ADDRESS BOYNTON BCH., FL 33437-3308 CITY-ST-ZiF 1.4 CITY-ST-ZIP DELETE 21 TITLE Change Addition THE NAME 2.2 NAME 2.3 STREET ADDRESS STREET ADDRESS CITY - ST - ZIF 2. 4 CITY - ST - ZIP DELETE Change Addition TITLE 3.1 TITLE NAME 3.2 NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-ZIP CITY - ST - ZIE DELETE Change 4.1 TITLE Addition TIFLE 4.2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS CHTY-ST ZIF 4.4 CITY-ST-ZIP DELETE Change Addition 5.1 TITLE THUE 52 NAME NAME **5.3 STREET ADDRESS** STREET ADDRESS 54 CITY-ST-ZIP CITY-ST-76 DELETE Change Addition TITLE 61 TITLE 6.2 NAME 6.3 STREET ADORESS STREET ADDRESS 6.4 CITY - ST - ZIP 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 3 if changed, or on an attachment with an address.

FILED Feb 20 1997 8:00am Secretary of State

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