

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

FILED
Mar 24 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P97000056298 (7)

1. Corporation Name
BEAUTY ELEMENTS, CORP

Principal Place of Business

~~17220 NW 64TH AVE #304~~
~~MIAMI FL 33015~~

Mailing Address

~~17220 NW 64TH AVE #304~~
~~MIAMI FL 33015~~

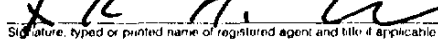
DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21 Beauty Elements Co.		26 Beauty Elements Co.		06/26/1997	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		4. FEI Number	
22 7323 NW 56th ST		27 7323 NW 56th ST		65-0766276	
City & State		City & State		5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required	
23 MIAMI FL		28 MIAMI FL		6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees	
Zip		Country		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☒ Yes ☐ No	
24 33166		25 U.S.A		29 33166	
26 U.S.A		30 U.S.A			

9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	
LEE, KI HYUNG		81 Name LEE, KI HYUNG	
17220 NW 64TH AVE #304		82 Street Address (P.O. Box Number is Not Acceptable)	
MIAMI FL 33015		7323 NW 56th ST	
		83	
		84 City MIAMI	
		FL	
		85 Zip Code 33166	

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



(NOTE: Registered Agent signature required when reinstating)

DATE

2/22/98

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1.1 TITLE	☐ Change ☐ Addition
NAME	LEE, KI HYUNG	1.2 NAME	
STREET ADDRESS	17220 NW 64TH AVE #304	1.3 STREET ADDRESS	
CITY - ST - ZIP	MIAMI FL 33015	1.4 CITY - ST - ZIP	
TITLE	SD	2.1 TITLE	☐ Change ☐ Addition
NAME	PARK, YOUNG MIN	2.2 NAME	
STREET ADDRESS	17220 NW 64TH AVE #304	2.3 STREET ADDRESS	
CITY - ST - ZIP	MIAMI FL 33015	2.4 CITY - ST - ZIP	
TITLE		3.1 TITLE	☐ Change ☐ Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY - ST - ZIP		3.4 CITY - ST - ZIP	
TITLE		4.1 TITLE	☐ Change ☐ Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY - ST - ZIP		4.4 CITY - ST - ZIP	
TITLE		5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY - ST - ZIP		5.4 CITY - ST - ZIP	
TITLE		6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY - ST - ZIP		6.4 CITY - ST - ZIP	

14. 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 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:



2/22/98

305)884-1250

CR2E034 (10/97)