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FILED
May 12 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 549336 (6)

1. Corporation Name

FLORIDA SOAP & COSMETIC CORPORATION

Principal Place of Business

255 ALHAMBRA CIR
SUITE 1000
CORAL GABLES FL 33134
US

Mailing Address

255 ALHAMBRA CIR
SUITE 1000
CORAL GABLES FL 33134
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

10/17/1977

4. FEI Number

59-1831707

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☒ Yes ☐ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

Country

24

25

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

29

30

9. Name and Address of Current Registered Agent

FRIED, RICHARD I.
255 ALHAMBRA CIRCLE, SUITE 1000
CORAL GABLES FL 33134

10. Name and Address of New Registered Agent

81 Name

Brunken, Teresita L.

82 Street Address (P.O. Box Number is Not Acceptable)

255 Alhambra Circle, Suite #1000

83

84

City
Coral Gables,

FL

85 Zip Code
33134

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

Teresita L. Brunken
Signature, typed or printed name of registered agent and title if applicable

Teresita L. Brunken

NOTE: Registered Agent signature required when reinstating

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE
NAME PD
STREET ADDRESS STIEFEL, WERNER K.
CITY-ST-ZIP 657 N GREENWAY DR
CORAL GABLES FL

TITLE ☐ DELETE
NAME TD
STREET ADDRESS FRIED, RICHARD I.
CITY-ST-ZIP 14340 BEDFORD COURT
DAVIE FL

TITLE ☐ DELETE
NAME SD
STREET ADDRESS BRUNKEN, TERESITA L
CITY-ST-ZIP 4630 S.W. 147TH CT.
MIAMI FL

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE ☒ Change ☐ Addition
2.2 NAME TD
2.3 STREET ADDRESS Pattullo, Matt S.
2.4 CITY-ST-ZIP 6920 S.W. 54th Street
Miami, Florida 33155

3.1 TITLE ☒ Change ☐ Addition
3.2 NAME SD
3.3 STREET ADDRESS Brunken, Teresita L.
3.4 CITY-ST-ZIP 1403 Obispo Avenue
Coral Gables, Florida 33134

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
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

Teresita L. Brunken

Teresita L. Brunken

(305) 443-3800

CR2E034 (10/97)