

FO 000 0001425

CAPITOL SERVICES d/b/a
PARALEGAL & ATTORNEY SERVICE BUREAU, INC.

(Requestor's Name)

1406 Hays Street, Suite 2

(Address)

Tallahassee, FL 32301 (904) 656-3992

(City, State, Zip)

(Phone #)

OFFICE USE ONLY

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
00 FEB 18 PM 1:55

1 00003139391 -- 0
-02/18/00--01041--017
*****70.00 *****70.00

1 00003139391 -- 0
-02/18/00--01041--018
*****8.75 *****8.75

CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):

1. Agora Cosmetics, Inc. (Corporation Name) _____ (Document #) _____

2. _____ (Corporation Name) _____ (Document #) _____

3. _____ (Corporation Name) _____ (Document #) _____

4. _____ (Corporation Name) _____ (Document #) _____

Walk in Pick up time 2/18 Certified Copy
 Mail out Will wait Photocopy Certificate of Status

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DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

NEW FILINGS	
<input type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/QUALIFICATION	
<input checked="" type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

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MK 2/14/00

Examiner's Initials _____

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FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State

Resubmit

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
00 FEB 18 PM 1:55

February 18, 2000

Please back date

CAPITOL SERVICES
TALLAHASSEE, FL

SUBJECT: AGORA COSMETICS, INC.
Ref. Number: W00000004603

We have received your document for AGORA COSMETICS, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please note that we have RETAINED your \$78.75 payment.

In addition to the materials enclosed, you must send a list of the NAMES AND ADDRESSES OF THE OFFICERS AND DIRECTORS and this page must be signed by and OFFICER or by the CHAIRMAN OF THE BOARD OF DIRECTORS. You may use the attached form.

Also, please tell us what the \$8.75 is for. Do you want a CC or a CUS?????

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6914.

Buck Kohr
Corporate Specialist

Letter Number: 900A00008909

RECEIVED
00 MAR 16 AM 11:04
SECRETARY OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

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09 FEB 18 PM 1:55

1. Agora Cosmetics, Inc..
(Name of corporation; must include the word "INCORPORATED", "COMPANY", "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present.)

2. New York 3. 13-3776466
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 6/29/94 5. Perpetual
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

6. 2/01/00
(Date first transacted business in Florida.) (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)

7. 580 Broadway, Suite 901
New York, New York 10012
(Current mailing address)


8. Sales of Goods
(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)

9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box **NOT** acceptable)

Name: United Corporate Services
Office Address: 9200 South Dadeland Boulevard, Suite #508
Miami, Florida, 33156
(Zip code)

10. Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.


(Registered agent's signature)

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

12. Names and addresses of officers and/or directors: (Street address **ONLY** - P.O. Box **NOT** acceptable)

A. DIRECTORS (Street address only - P.O. Box NOT acceptable)

Chairman: Francois Nars

Address: c/o A. Kozak and Company, LLC
192 Lexington Avenue, Suite 1100, New York, New York 10016

Vice Chairman: Francois Nars

Address: c/o A. Kozak and Company, LLC
192 Lexington Avenue, Suite 1100, New York, New York 10016

Director: Francois Nars

Address: c/o A. Kozak and Company, LLC
192 Lexington Avenue, Suite 1100, New York, New York 10016

Director: _____

Address: _____

B. OFFICERS (Street address only - P.O. Box NOT acceptable)

President: Francois Nars

Address: c/o A. Kozak and Company, LLP
192 Lexington Avenue, Suite #1100

New York, New York 10016

Vice President: Jennifer LISTER OLDFIELD

Address: c/o A. Kozak and Company, LLP
192 Lexington Avenue, Suite #1100
New York, New York 10016

Secretary: _____

Address: _____

Treasurer: _____

Address: _____

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. Jennifer Lister, EXECUTIVE VICE PRESIDENT
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. Jennifer Lister
(Typed or printed name and capacity of person signing application)

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DIVISION OF CORPORATIONS
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State of New York } ss:
Department of State

I hereby certify, that the Certificate of Incorporation of AGORA COSMETICS, INC. was filed on 06/29/1994, with perpetual duration, and that a diligent examination has been made of the Corporate index for documents filed with this Department for a certificate, order, or record of a dissolution, and upon such examination, no such certificate, order or record has been found, and that so far as indicated by the records of this Department, such corporation is a subsisting corporation.

The Biennial Statement is past due.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
00 FEB 18 PM 1:55



Witness my hand and the official seal
of the Department of State at the City
of Albany, this 16th day of February
two thousand.

Special Deputy Secretary of State