

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

FILED

05 NOV -3 PM 3:10

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F00000002833

1. Corporation Name

NARS COSMETICS, INC.

2. Principal Office Address

580 Broadway, 8th Floor

Suite, Apt. #, etc.

City & State

New York, NY

Zip

10012

Country

USA

3. Mailing Office Address

100 Tokeneke Road

Suite, Apt. #, etc.

City & State

Darien, CT

Zip

06820

Country

USA

REINSTATEMENT

CR2E081 (8/05)

10-06-05 01039 005 \$1,058.75

4. Date Incorporated or Qualified
To Do Business in Florida

5/8/2000

5. FEI Number

134116877

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

Corporation Service Company

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

1201 Hays Street

Suite, Apt. #, Etc.

City

Tallahassee

State

FL

Zip Code

32301

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of
Registered Agent

Janet Budhu, Asst. Vice President

Date

10/4/05

REGISTERED AGENT MUST SIGN

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
P/D	Francois Nars	580 Broadway	New York, NY 10012
C/D	Yasuaki Seko	580 Broadway	New York, NY 10012
V	Mukesh Saxena	580 Broadway	New York, NY 10012
S	Joseph S. Kendy, Jr.	100 Tokeneke Rd.	Darien, CT 06820
D	Kiyoharu Ikoma	178 Bauer Drive	Oakland, NJ 07436

10. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(f), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE:

JOSEPH S. KENDY, JR.

Date

11/2/05

Daytime Phone #

2036527866