2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 09, 2004
Secretary of State

DOCUMENT# F47621

Entity Name: ALBERTO CORTES COSMETICS AND PERFUMES, INC.

Current Principal Place of Business:

20 SE 3 AVE
2ND FL
MIAMI, FL 33131

New Principal Place of Business:

Current Mailing Address:

20 SE 3 AVE
2ND FL
MIAMI, FL 33131

New Mailing Address:

FEI Number: 59-2496559 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CORTES, CLAUDIA
20 S.E. 3 AVE
2ND FLOOR
MIAMI, FL 33131 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: CORTES, CLAUDIA
Address: 1600 S BAYSHORE LANE 9C
City-St-Zip: MIAMI, FL 33133

Title: DT ( ) Delete
Name: BENDENBAUGH, ERIC
Address: 4505 BANYAN LANE
City-St-Zip: MIAMI, FL

Title: VP ( ) Delete
Name: CORTES, SANDRA
Address: 4505 BANYAN LANE
City-St-Zip: MIAMI, FL

Title: S ( ) Delete
Name: CORTES, PATRICIA
Address: 200 SE 15TH RD #115
City-St-Zip: MIAMI, FL 33129

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: VP (X) Change ( ) Addition
Name: CORTES, SANDRA
Address: 4505 BANYAN LANE
City-St-Zip: MIAMI, FL 33137

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: DIR ( ) Change (X) Addition
Name: CORTES, ALBERTO
Address: 1750 JAMES AVE. APT 6H
City-St-Zip: MIAMI BEACH, FL 33139

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ERIC BEDENBAUGH DT 02/09/2004

Electronic Signature of Signing Officer or Director — Date