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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B, Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # F9300004138 (4)

GAL COSMETICS, INC.

Principal Place of Business

\* EDWARD SHEROTA, JR. P.A.
18140 SOUTHWEST 97 AVE.
MIAMI FL 33157

Mailing Address

% EDWARD SHEROTA, JR. P.A. 18140 SOUTHWEST 97 AVE. MIAMI FL 33157

## FILED Apr 01 1998 8:00am Secretary of State



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

3/3/98

09/10/1993

2. Principal I	Place of Business	2a. Mailing Addres	s			4. FEI Number		Ap	plied For	
21		26	26			65-0427195		No	t Applicable	
Suite, Apt. #, etc.		Suite, Apl. #, e	Suite, Apl. #, etc.			5. Certificate of Status Desired See Required Fee Required				
City & State         City & State           23         28						B. Election Campaign Financing     Trust Fund Contribution     Added to Fees				
Zip	Country	Zip	Count	try		8. This corporation owes or has paid the cur				
24 25 29 30					Personal Property Tax due June 30. Yes No				] No	
	9. Name and Address of Curre	ent Registered Agent				10. Name and Address of New Registered	Agent			
MAMI FL 33157					Name					
					82 Street Address (P.O. Box Number is Not Acceptable)					
					Street Address (F.O. Box Number is Not Acceptable)					
					B3					
			ļ <u>.</u>	B4				<b></b> : 4		
			ľ	54	City	FL	65	Zip (	Code	
11. Pursuant to the provisions of Soctions 607.0502 and 607.1508, Florida Statutes, the al					-named corpo	oration submits this statement for the purpose of	f chanc	ino it	s registered	
office or	registered agent, or both, in the Star	te of Florida. Such change	was authorized	bγ	the corporation	on's board of directors. I hereby accept the app	ointme	nt as	registered	
•	am familiar with, and accept the obt	gations or, Section 607,05	ius, Fiorida Statui	ites.						
SIGNATURE	Signature typed or profind name of registered a	and and tale disease, state	(NC)TE: Registered /	Anan	nt nigent us securitor	d when reinstating) DATE				
12.		ND DIRECTORS	13.	Agen	il signature requiet	ADDITIONS/CHANGES TO OFFICERS AND	DIRE	CTOR	S IN 12	
TITLE	1 CP	DELE		£ .	T	ADDITIONO OF TAXABLE AND	Chi		Addition	
NAME	SAINZ DE VICUNA, JUAN M		•	1.2 NAME				ungo		
	ATT 444 ADID D 40444 4/44									
STREET ADDRESS		28 ALAUALA DE MEN			ADORESS					
CITY-ST-ZIP	MADRID SPAIN			1.4 CITY-ST-ZIP			T 1 01		1 1 1 1 1 1 1 1 1 1	
TITLE	VTD L. DELETE			21 TITLE			☐ Ch	ange	Addition	
NAME	CAMINO, ANGEL E		2.2 NAM		ŀ					
STREET ADDRESS	CTRA. MADRID-BARNA KM.	29 ALACALA DE HEN	AR 2.3 STRE	EET A	ADDRESS					
CITY-ST-ZIP	MADRID SPAIN		2. 4 CITY		r-ziP		T		<u> </u>	
TITLE	S DELETE		3	3.1 TITLE			Ch:	ange	Addition	
NAME	SANCHEZ, GREGORIA ESQ		3.2 NAM	ME		•				
STREET ADDRESS		.00R	3.3 STRE	EET A	ADDRESS					
CITY - ST - ZIP	NEW YORK NY 10017		3.4. CITY	Y - S1	T-ZIP					
TITLE	į	DELE	TE 4.1 TITLI	E.		•	☐ Chi	ange	Addition	
NAME			4 2 NAM	ME	ì					
STREET ADDRESS			4.3 STRE	EET A	ADDRESS					
CITY-ST-ZIP			4.4 C/TY	Y-\$1	í-ZiP					
TITLE		DELE	TE 5.1 TITL	.E	T		Ch	ange	☐ Addition	
NAME			5.2 NAM	ИE						
STREET ADDRESS			5.3 STR	EET A	address					
CITY-ST-ZIP	1		5.4 CITY	Y-ST	- ZIP					
TITLE		DELE	TE 6.1 TITU	E			Ch	ange	Addition	
NAME			6.2 NAM	Æ						
STREET ADDRESS			6.3 STRE	EET A	ADDRESS					
CITY-ST-ZIP		$\wedge$ $\cap$	6.4 CITY	Y-S1	I - ZIP					
14. I hereby	certify that the information supplied	with this filing does not a	ralify for the exen	npti	ion stated in S	Section 119.07(3)(i), Florida Statutes. I further ce	ertify th	at the	information	
indicated officer or Block 12	d on this annual report or supplemer r director of the corporation or the re Por Block 13 if changed, or on an all	ital annual redort is tue a ceiver or trusice en bowei tachment with arvadoress	nd accurate and god to execute thi	tha is re	it my signature eport as requi	Section 119.07(3)(i), Florida Statutes. I further ca e shall have the same legal effect as if made un ired by Chapter 607, Florida Statutes; and that r	der oar ny nan	th; tha ne app	at I am an pears in	