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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # F94237

(7)

LOOK GREAT COSMETICS, INC.	11	
	·	
Principal Place of Business	Mailing Address	
771 E PALMETTO PK RD BOCA RATON FL 33432	771 E PALMETTO PK RD BOCA RATON FL 33432-5103	

FILED Mar 26 1997 8:00am Secretary of State



				4			HINA DIKENI	 	
Principal Plac	e of Business	Mailing Address		• •		1 1001120 Still LAUL BERIN HAND 19111 FOUT	#1#13 #1#16 #1# <i>1</i>	-	
771 E PALMET BOCA RATON		771 E PALMETTO PK R BOCA RATON FL 33432					٠		
					•	3. Date Incorporated or Qualified 08/11/1982	3a, Date 04/15	of Last R	eport
2. Principal P	Place of Business	2a. Mailing Address				4. FEI Number		AF	plied For
21		26				59-2221185		No	t Applicable
Suite, Apt.	#, e lc	Suite, Apt. #, etc.				5. Certificate of Status Desired		\$8.75 Fee Re	Additional equired
City & Stat	te	City & State		-		Election Campaign Financing Trust Fund Contribution		\$5.00 Added	May Be to Fees
Zip	Country	Zip	Cou	ıntry		8. This corporation has liability for i	ntangible ta	x under s	. 199.032,
24	25	29	30			Florida Statutes	Yes 🗌	No	
	g. Name and Address of Current	Registered Agent				10. Name and Address of New Re	pistered Ag	ant	
GO	LDBERG, JAYE			61	Name				
	E. PALMETTO PARK RD. CA RATON FL 33432			82	Street Add	ress (P.O. Box Number is Not Acceptab	le)		
601	UA RATUR EL 33432			83					
				84	City		FL	85 Zip	Code
11. Pursuant	to the provisions of Sections 607.0502	2 and 607.1508, Florida Stat	tutes, the a	bove	-named cor	poration submits this statement for the p	urnose of c	nanging it	s registered
office or r agent. La	registered agent, or both, in the State i am familiar with land accept the obliga	of Florida. Such change wa tions of, Section 607.0505,	s authorize Florida Sta	d by tutes.	the corpora	tion's board of directors. I hereby accep	t the appoir	itment as	registered
SIGNATURE	Signature, typed or printed name of registered ager	it and title if applicable (N	OTE: Registere	ed Agen	it signature requ	ired when reinstating)	DATE		
12.	OFFICERS AND	DIRECTORS	13.			ADDITIONS/CHANGES TO OFFIC	ERS AND D	IRECTOF	S IN 12
TITLE	PD	☐ DELETE	1.13	ITLE		PD _		Change	Addition
NAME	GOLDBERG, JAYE		1.2 N	AME	(GOLDBERG, JAYE 1023 RUSSELL D HIGHLAND BCH	, ,		
STHEET ADDRESS	2730 TIMBERCREEK CIRCLE		1.3 \$	TREET	ADDRESS /	1023 RUSSELL D	RIJE		
City-St-ZiP	BOCA RATON FL		1.4 0	ITY-ST	-ZIP	HIGHLAND BCH	FL.	534E	7
THILF		☐ DELFTE	2.1 T	ITLE				J Change	Addition
NAME			2.2 N	IAME	1				
STREET ADDRESS			2.3 S	TAEET A	ADDRESS				
CITY-ST-ZIP			2.40	CITY - \$1	í-ZIP				
TITLE		☐ DELETE	3.1 T	ITLE				Change	Addition
NAME			3.2 N	IAME					
STREET ADDRESS			3.3 S	TREET	ADDRESS				
CITY - ST - ZIP			3.4. 0	CITY - \$1	I-ZIP				
TITLE		☐ DELETE	4.1 T	ITLE			Ę	Change	Addition
NAME			4.21	NAME					
STREET ADDRESS			4.3 \$	TREET A	ADDRESS				
CITY - ST - ZIP			4.4.0	ITY-ST	-ZIP				·
THUE		☐ DELETE	5.1 Ť	ITLE				Change	Addition
NAME			5.2 N	IAME					
STREET ADDRESS			5.3 \$	TREET A	ADDRESS				
CiTY-ST-7#			540	ITY-ST	-ZiP				
TITLE		DELETE	611	ITLE	Ţ		L	Change	☐ Addition
NAME			62 N	IAME					
STREET ADDRESS			638	TREET A	ADDRESS				
CITY-ST-ZIP			640	aty-st	- ZIP				

14. I do 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: