## •2001 UNIFORM BUSINESS REPORT (UBR)

## FILED May 12, 2001 8:00 am Secretary of State DOCUMENT # F97000000235 1. Entity Name KOSMEO COSMETICS, INC. 05-12-2001 90025 001 \*\*\*158.75 Principal Place of Business Mailing Address 1501 NORTHPOINT PARKWAY, STE 100 1501 NORTHPOINT PARKWAY, STE 100 WEST PALM BEACH FL 33407 WEST PALM BEACH FL 33407 C0062688 US US 3. Mailing Address 2. Principal Place of Business P.O. Box 541119 Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE 4. FEI Number City & State City & State Applied For 75-2292724 Not Applicable <u>Lake Worth,</u> FLZip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 33454-1119 Palm Beach 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name HERSEY, HARRY W JR Street Address (P.O. Box Number is Not Acceptable) 1501 NORTHPOINT PKWY, SUITE 100 WEST PALM BEACH FL 33407 Zip Code City FL 8. 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 (NOTE: Registered Agent signature required when reinstating) DATE Signature, typed or printed name of registered agent and title if applicable FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2001 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. 11. PCD Change ☐ Addition ☐ Delete TITLE TITLE HERSEY JR, HARRY W NAME NAME 1501 NORTHPOINT PKWY, STE 100 STREET ADDRESS STREET ADDRESS WEST PALM BEACH FL CITY-ST-ZIP CITY-ST-ZIP ממע ☐ Delete TITLE Change ☐ Addition TITLE HERSEY III, HARRY W NAME NAME 1501 NORTHPOINT PKWY, STE 100 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP WEST PALM BEACH FL ☐ Change Addition TITLE ☐ Delete TITLE STOCKDILL, BETSY L NAME NAME 1501 NORTHPOINT PKWY, STE 100 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP WEST PALM BEACH FL CITY-ST-ZIP Change ☐ Addition TITLE TITLE M Delete HUDSON, WILLIAM E NAME NAME 1501 NORTHPOINT PKWY, STE 100 STREET ADDRESS STREET ADDRESS WEST PALM BEACH FL CITY-ST-782 CITY-ST-ZIP Change ☐ Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete TITLE Change ☐ Addition TITLE NAME NAME

13. I 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE

STREET ADDRESS

CITY-ST-ZIP

SIGNING OFFICER ORDE

STREET ADDRESS CITY-ST-ZIP