

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# L67337

FILED  
Mar 29, 2002 8:00 AM  
Secretary of State

**Entity Name:** INTERNATIONAL PHARMACEUTICALS & COSMETICS, INC.

**Current Principal Place of Business:**

1850 N.W. 69TH AVENUE  
SUITE 1  
PLANTATION, FL 33313

**New Principal Place of Business:**

**Current Mailing Address:**

1850 N.W. 69TH AVENUE  
SUITE 1  
PLANTATION, FL 33313

**New Mailing Address:**

**FEI Number:** 65-0202313

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

MUNDSCHENIK, DAVID D.  
504 SE 2ND AVE  
DANIA, FL 33004 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

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: WISHART, JAMES W  
Address: 11104 DEVEREUX STATION LANE  
City-St-Zip: FAIRFAX STATION, VA 22039

Title: VSD ( ) Delete  
Name: MUNDSCHENK, SUZANNE  
Address: 504 SE 2ND AVE.  
City-St-Zip: DANIA, FL 33004

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition  
Name: JEAN-BAPTIST, MONTGOMERY  
Address: 81 AVENUE VICTOR HUGO  
City-St-Zip: PARIS, FRANCE, FR 75116

Title: CEOD (X) Change ( ) Addition  
Name: MUNDSCHENK, SUZANNE  
Address: 504 SE 2ND AVE.  
City-St-Zip: DANIA, FL 33004

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: SUZANNE MUNDSCHENK

CEOD

03/29/2002

Electronic Signature of Signing Officer or Director

Date