APPROVED 2000 UNIFORM BUSINESS REPORT (UBR) DOCUMENT # L990000 7874 1. Entity Name 00 MAY 23 AM 7: 56 Beauty Artists LLC SECRETARY OF STATE TALLAHASSEE, FLORIDA Principal Place of Business Mailing Address 6th Floor 6th Floor Bank of Boston Bldg. Bank of Boston Bldg Via Espana & Elvira Mendez Via Espana & Elvira Mendez Panama 5, Republic of PanamaPanama 5, Panama 2. Principal Place of Business 3. Mailing Address 27 NEW BOND STREET Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 100000 Not Applicable Zip Country Country \$5.00 Additional 5. Certificate of Status Desired WIY 9HD **UK** Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name CORPORATE CREATIONS ENTERPRISES INC Street Address (P.O. Box Number is Not Acceptable) 941 FOURTH STREET #200 MIAMI BEACH FL 33139 City Zip Code 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 Signature, typed or printed name of registered agent and title if applicable. DATE THE NOWING THE EASTON 9. MANAGING MEMBERS/MEMBERS 10. ADDITIONS/CHANGES TITLE October 12 FINMAN INTERNATIONAL TITLE **Addition** MAME MAME CORPORATION TIRFFT ADDRESS 16th FLOOR, DANK OF BOSTON BUILDING STREET ADDRESS VIA ESPANA & ELVIRA MENOCE ST CITY-21-712 CITY- ST. 71P PANAMA 5. REPUBLIC OF PANAMA TITLE NEW HIGHWAY MANAGEMENT TITLE Change NAME CORP. MGRM NAME STREET ADDRESS 16th FLOOR, BANK OF BOSTON BUILDING STREET ADDRESS ESPANA & ELVIRA MENOEZ ST CITY- 21-712 CITY-ST-ZIP REPUBLIC OF PANAMA PANAMA J TITLE Delete MLE Addition | MAME MAME 30000328768: -06/13/00--01090 BTREET ADDRESS STREET ADDRESS CIT-81-21P CITY- ST- ZIP \*\*\*\*\*50.00 \*\*\*\*\*50.00 TITLE ☐ Deleta TITLE Addition MAME MAME STREET ADDRESS STREET ADDRESS CITY- \$1-20 CITY-81-21P TITLE C Delete TITLE Addition NAME BAME STREET //SCREES STREET ADDRESS CITY-81-21P CITY - 21- 21F ПП ☐ Delete TITLE Addition (Change MAME BAMF STREET ADDRESS STREET ADDRESS

11. I hereby certify that the information supplied with this filing closs not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee employeered to execute this report as required by Chapter 608, Florida Statutes.

CITY-RT-71P

SIGNATURE:

C1TY- 2T- 7/P

25/04/00

Daytime Phone F