

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

APPROVED
AND
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55 MAY -1 AM 10:42

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION ANNUAL REPORT 1995	FLORIDA DEPARTMENT OF STATE Sandra B. Montman Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P93000027429 (8)

1. Corporation Name

TREND COSMETICS U. S. A., INC.

Principal Place of Business 11345 53RD STREET NORTH CLEARWATER FL 34620	Mailing Address 11345 53RD STREET NORTH CLEARWATER FL 34620
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DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 04/14/1993	3a. Date of Last Report 05/01/1994
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2. Principal Place of Business 21 101 Crestwood Lane State, Apt. # etc.	2a. Mailing Address 26 PO Box 787 State, Apt. # etc.
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4. FET Number 59-3176005	Applied For Not Applicable
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22 City & State Largo FL	27 City & State Largo FL
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5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
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23 Zip 34640	25 Country USA	29 Zip 34649	30 Country USA
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6. Election Campaign Financing Trust Fund Contribution ☐	\$5.00 May Be Added to Fees
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9. Name and Address of Current Registered Agent UCC FILING & SEARCH SERVICES INC. 526 EAST PARK AVE. SUITE 200 TALLAHASSEE FL 32301	
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10. Name and Address of New Registered Agent	
81 Name	
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits the statement for the purpose of changing its registered office or principal place of business in the State of Florida. Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE

12. OFFICERS AND DIRECTORS	
12.1 NAME DIRECT ADDRESS CITY & STATE	PT BOUWEN, THEO J.G.M. 1688 JG NIBBIXWOOD, OVERSPOOR 21, POSTBUS35 1679 ZG MIDWOUD, NETHERLANDS
12.2 NAME DIRECT ADDRESS CITY & STATE	V BOUWEN-VAN TOOR, MAGDALENA M 1688 JG NIBBIXWOOD, OVERSPOOR 21, POSTBUS35 1679 ZG MIDWOUD, NETHERLANDS
12.3 NAME DIRECT ADDRESS CITY & STATE	
12.4 NAME DIRECT ADDRESS CITY & STATE	
12.5 NAME DIRECT ADDRESS CITY & STATE	
12.6 NAME DIRECT ADDRESS CITY & STATE	
12.7 NAME DIRECT ADDRESS CITY & STATE	
12.8 NAME DIRECT ADDRESS CITY & STATE	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS (IN 12)	
13.1 NAME DIRECT ADDRESS CITY & STATE	☐ Change ☐ Addition
13.2 NAME DIRECT ADDRESS CITY & STATE	☐ Change ☐ Addition
13.3 NAME DIRECT ADDRESS CITY & STATE	☐ Change ☐ Addition
13.4 NAME DIRECT ADDRESS CITY & STATE	☐ Change ☐ Addition
13.5 NAME DIRECT ADDRESS CITY & STATE	☐ Change ☐ Addition
13.6 NAME DIRECT ADDRESS CITY & STATE	☐ Change ☐ Addition
13.7 NAME DIRECT ADDRESS CITY & STATE	☐ Change ☐ Addition
13.8 NAME DIRECT ADDRESS CITY & STATE	☐ Change ☐ Addition

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 134.07(1)(b), 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 this 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 of Block 13 of this report or on an attachment with an address.

SIGNATURE:

Theo Bouwen President

SIGNATURE AND TYPED OR PRINTED NAME OF OFFICER OR DIRECTOR

5-1-95

813-584-2108