

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 22, 2003 8:00 am
Secretary of State

04-22-2003 90057 036 ***150.00

DOCUMENT # P93000027429

1. Entity Name
TRIND COSMETICS U. S. A., INC.



Principal Place of Business
**9061 130TH AVENUE NORTH
SUITE 712
LARGO FL 33773
US**

Mailing Address
**9061 130TH AVENUE NORTH
SUITE 712
LARGO FL 33773
US**

11006115



2. Principal Place of Business

9031 132nd Ave. N.

3. Mailing Address

9031 132nd Ave. N.

Suite, Apt. #, etc.

Suite 801B

Suite, Apt. #, etc.

Suite 801B

City & State

Largo FL

City & State

Largo FL

☐ CHECK HERE IF MAKING CHANGES

4. FEI Number

59-3176005

Applied For

☐ Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**PROTONENTIS, KENNETH G
1591 GULF BLVD., PENTHOUSE 2
CLEARWATER FL 33767-2997**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2003 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE **PTD** ☐ Delete
NAME **BOUWEN, THEO J GM**
STREET ADDRESS **1688 JH NIBBIXWOU, OVERSPOOR 35 POSTBUS35**
CITY-ST-ZIP **1679 ZG MIDWOU, NETHERLANDS**

TITLE **V** ☐ Delete
NAME **BOUWEN-VAN TOOR, MAGDALENA M**
STREET ADDRESS **1688 JH NIBBIXWOU, OVERSPOOR 35 POSTBUS35**
CITY-ST-ZIP **1679 ZG MIDWOU, NETHERLANDS**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **Secretary** ☐ Change ☒ Addition
NAME **Richard W. Houts**
STREET ADDRESS **203 Harbor Bluff Dr.**
CITY-ST-ZIP **Largo FL 33770**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Richard W. Houts

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-16-03 727 586 7670

Date Daytime Phone #

CR2E034 (10/02)