**PROFIT CORPORATION** ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P9300036024

1. Corporation B&RC	OSMETICS, INC	, , , , , , , , , , , , , , , , , , ,								
Principal Place	e of Business	Mailing Address		•		<b>-</b> {		801 <b>58</b> 11 <b>86158</b> (	188 <b>5</b> 1411 <b>831</b>	II HUU UICI HOOF
8826 STATE RE	) 84	8826 STATE RD 84 DAVIE FL 33324								
US US						DO NOT WRITE IN THIS SPACE				
	t .					3. Date Incorpo 05/18/199		l		
2. Principal P	lace of Business	2a. Mailing Address	_			4. FEI Number			A	Applied For
21		26				65-041184	14			lot Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				5. Certifcate of	Status Desired	□ .		Additional Required
22	*	27					<del></del>			
- City & Stat		City & State		•	-	6. Election Cam Trust Fund C				May Be ( to Fees
Zip	Country	Zip	Cou	ntrv		8. This corporat		rent vear Inta		
<del></del>	25	29	30	,		Personal Pro		,	Yes	□No
24	9. Name and Address of Current					10. Name and A		Registered A	gent	
	·			81	Name					
GADH, MANSTINDER K				82	Street Addr	ess (P.O. Box Numl	ner is Not Accept	table)		
	WINDMILL LAKE ROAD			Ottoberradi						
FT.	LAUDERDALE FL 33332			83						
				84	City			FL	85 Zip	Code
office or t	to the provisions of Sections 607.0502 egistered agent, or both, in the State of amiliar with, and accept the obligations of the obligation of the state of the s	or Florida, Such change was a lions of, Section 607.0505, Florida	rida Stati	utes.	me corporation	on's board of directo	rs. I hereby acce	pt the appoin	tment as	registered
12.	OFFICERS ANI	***************************************	13.			4-00	HANGES TO O	FFICERS AN	D DIRECT	ORS IN 12
TITLE ·	PD	☐ DELETE	1.1 TI	πE		1			Change	Addition
NAME	GADH, MANSTINDER K		1.2 NA	ME		•				
STREET ADDRESS	3855 WINDMILL LAKE ROAD		1,3 \$1	REET	ADDRESS					ļ
CITY-ST-ZIP	FT. LAUDERDALE FL		1.4 CI	TY-ST	-ZIP					
TITLE	D	☐ DELETE	2.1 TT	TLE					Change	e ☐ Addition
NAME	GADH, GURPARTAP S		2.2 N	AME.						
STREET ADDRESS	3855 WINDMILL LAKE ROAD		2.3 ST	REET.	ADDRESS					
CITY-ST-ZIP	FT. LAUDERDALE FL		2.4 C	ITY-ST	T-ZIP			<u> </u>		
TITLE		☐ DELETE	3.1 ∏ 3.2 N/			. 2		•	Change	Addition
STREET ADDRESS			3.3 ST	REET	ADORESS					ţ
CITY-ST-ZIP			3.4. C	ITY-ST	r-z:P					
TITLE		☐ DELETE	4.1 TT	TLE					☐ Change	e Addition
NAME			4. 2 N	AME			•			
STREET ADDRESS	ľ		4.3 S1	REET	ADDRESS					
CITY-ST-ZIP			4.4 CI	TY-ST	-ZIP			,		
TITLE		☐ DELÉTÉ	5.1 TI						Chang	e 🗌 Addition
NAME			5.2 N							
STREET ADDRESS					ADDRESS					
CITY-ST-ZIP		7 Delete	5.4 CI	TY-ST	-ZIP				Chang	Addition
			= £ 1 Tf	115	1					A LIBRATION I

14. 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 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 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

6.4 CITY-ST-ZIP

6.2 NAME

6.3 STREET ADDRESS

SIGNATURE:

NAME

STREET ADDRESS

FILED Apr 23, 1999 8:00 am Secretary of State

04-23-1999 90078 019 \*\*\*150.00