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PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P93000087257

1. Corporation Name

PALM BEACH INTERNATIONAL COSMETICS, INC.

Principal Place of Business

303 ROYAL PINCIANA PLAZA
SUITE 1400
PALM BEACH FL 33480
US

Mailing Address

1 SE 3RD AVE.
SUITE 1400
MIAMI FL 33131
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

12/20/1993

4. FEI Number

65-0463065

Applied For

Not Applicable

2. Principal Place of Business

21 Suite, Apt. #, etc.

23 City & State

24 Zip

Country

2a. Mailing Address

26 c/o Holland & Knight LLP

27 Suite, Apt. #, etc.

701 Brickell Avenue, Ste. 3000

28 City & State

Miami, Florida

29 Zip

33131

Country

5. Certificate of Status Desired ☐

\$8.75 Additional

Fee Required

6. Election Campaign Financing

Trust Fund Contribution ☐

\$5.00 May Be

Added to Fees

8. This corporation owes the current year Intangible

Personal Property Tax. ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

COPROLITE CORPORATION
SUITE 1400
ONE SOUTHEAST THIRD AVE.
MIAMI FL 33131

10. Name and Address of New Registered Agent

81 Name
Intrastate Registered Agent Corporation

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

701 Brickell Avenue

83 Suite 3000

84 City
Miami

FL

85 Zip Code
33131

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

SIGNATURE

Leo P. Vossen
Signature of Registered Agent or Director

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE TS ☒ DELETE

NAME MEYER, ROLF O

STREET ADDRESS 7501 MARSH COVE

CITY-ST-ZIP PALM BEACH GARDENS FL 33418

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

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE PSTD ☐ Change ☒ Addition

1.2 NAME Dr. Leo P. Vossen

1.3 STREET ADDRESS 303 Royal Poinciana Plaza

1.4 CITY-ST-ZIP Palm Beach, Florida 33480

2.1 TITLE VP ☐ Change ☒ Addition

2.2 NAME Ilse Chamberlain

2.3 STREET ADDRESS 303 Royal Poinciana Plaza

2.4 CITY-ST-ZIP Palm Beach, Florida 33480

3.1 TITLE D. ☐ Change ☒ Addition

3.2 NAME Jutta Kleine-Tebbe

3.3 STREET ADDRESS 303 Royal Poinciana Plaza

3.4 CITY-ST-ZIP Palm Beach, Florida 33480

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

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.

SIGNATURE:

Leo P. Vossen
Signature and Typed or Printed Name of Signing Officer or Director
Dr. Leo P. Vossen, President

02/28/1999

Date

561.802.6160

Daytime Phone #

CR2E034 (11/98)