

**APPLICATION
FOR
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **PA5000059582**

1. Corporation Name

Cosmetics 2000, Inc.

FILED

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

REINSTATEMENT 96-97

Principal Place of Business		Mailing Address	
c/o Stanley Acker, President 4000 Island Blvd, Unit 1604 Williams Island North Miami Beach, Florida 33160			
If above addresses are incorrect in any way, line through incorrect information and enter correction below.			
2. New Principal Office Address, if Applicable		3. New Mailing Address, if Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip		Zip	
Country		Country	
4. Date incorporated or qualified to do business in Florida		August 2, 1995	
5. FEI Number		Applied For / Not Applicable	
65-0602490			
6. CERTIFICATE OF STATUS DESIRED ☒		S375 Additional Fee required for a Certificate of Status	

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)			
1. Title(s)	2. Name of Officers and/or Directors	3. Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	4. City / State / Zip
P/D	Stanley Acker	4000 Island Blvd, Unit 1604 Williams Isl.	North Miami Beach Florida 33160
S/D	Karen Acker	P.O. Box 800, N/A	Nyack, New York 10960
V/D	Mark Acker	47 Tranquillity Road	Suffern, New York 10901
V/T/D	David Acker	196 East 75th St. Apt. 17D	New York, New York 10021
			-04/02/97--01076--016 ***915.007***915.00

8. Name and Address of Current Registered Agent		9. Name and Address of New Registered Agent	
CT Corporation System 1200 South Pine Road Plantation, Florida 33324		Name: Stanley Acker Street Address (P.O. Box Number is Not Acceptable): 4000 Island Blvd Suite, Apt. #, Etc.: Unit 1604 Williams Island City: North Miami Beach State: FL Zip Code: 33160	

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0306, F.S.

Signature of Registered Agent: Stanley Acker Date: 0 2 2 8 9 7

STANLEY ACKER REGISTERED AGENT MUST SIGN

11. Does this corporation pay any intangible tax to the Dept. of Revenue under S. 199.032, Florida Statutes. Yes ☐ No ☒ (See other side for information on intangible tax.)

12. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Section 119.07(3)(k) in the event that the information supplied is deemed exempt from public access. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., and that all fees owed by the corporation have been paid. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE: David Acker 02 28 97

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR: DAVID ACKER