2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

P95000059582 **DOCUMENT #**



FILED Mar 10, 2003 8:00 am § Secretary of State

COSMET	FICS 2000, INC.				03-10-2003 9	90141 012 ***1:	50.00	
Principal Pla 160 KEY PAI BOCA RATO US	_	Mailing Address P.O. BOX 811 NYACK NY 10960			; 	ir Afrik Barde Cikle Tokol Ge	10. 1840 UKS 1881	
2. Principal Place of Business		3. Mailing Address						
Suite, Apt. #, etc.		Suite, Apt. #, etc.		i	CHECK HERE IF MAKING CHANGES			
City & State		City & State			4. FE! Number 65-0602490 Applied For Not Applied For		Applied For Not Applicable	
Zip	Country	Zip	Country		5. Certificate of Status Desired	□ \$8.75 Fee Requ	Additional	
	6. Name and Address of Current	Registered Agent	'		7. Name and Address of New R			
ACKER, S	STANLEY		Name			ogistorou Agent		
160 KEY PALM RD			Street	Street Address (P.O. Box Number is Not Acceptable)				
BUCA RA	NTON FL 33432							
8. The above	e named entity submits this statement for	or the purpose of changing its	City			FL Zip C		
the obliga	e named entity submits this statement for ations of registered agent.	ir the purpose of changing its	registerea office	or registere	d agent, or both, in the State of Flor	rida. I am familiar wi	h, and accept	
	3 3							
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable. (NOTI	E: Registered Agent sign	ature required v	when reinstation)	DATE		
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c Afte	FILE NOW!!! FEE IS \$150.00 or May 1, 2003 Fee will be \$550.00 k Payable to Florida Department o				9. Election Campaign Fina Trust Fund Contribution	ancing\$5	.00 May Be led to Fees	
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indicated on this report or 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.

SIGNATURE:

SIGNOTED NAME OF SIGNING OFFICER OR DIRECTOR

(ATTHANO

845-348-6200