## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1996

P95000079562 (1)

DOCUMENT #
1. Corporation Name

TRANSWORLD	MAKEUP	CORPOR	ation
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Principal Place	of Business	Mailing Address	•				
		268 E. FLAGLER STR MIAMI FL 33131	REET				
					3. Date Incorporated or Qualified 3a. Date of Last 10/17/1995	Report	
2. Principal Pla	ace of Business	2a. Mailing Address			4. FEI Number	Applied For	
21		26			65-0621517	Not Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.	1		1 3. Centicate di Status Desired I i '	\$8.75 Additional Fee Required	
City & State	)	City & State	City & State			\$5.00 May Be Added to Fees	
Zip	Country	Zip	Cou	ntry	8. This corporation has liability for intangible tax under		
24 .	25	29	30		Florida Statutes Yes No		
	9. Name and Address of Curren	t Registered Agent	*****		10. Name and Address of New Registered Agent		
•	DANTALO PROPERTO ALLA SELLA DEL CONTROLO DE LA CONTROLO DEL CONTROLO DE LA CONTROLO DE LA CONTROLO DE LA CONTROLO DE LA CONTROLO DEL CONTROLO DE LA CONTROLO DEL CONTROLO DEL CONTROLO DE LA CONTROLO DEL CONTROLO DE LA CONTROLO DEL CONTROLO DE LA CONTROLO DE LA CONTROLO DE LA CONTROLO DE LA C			81 Name	e .		
• ROTH, LEONARD A 9350 SO. DIXIE HIGHWAY PENTHOUSE TWO MIAMI FL 33156		82 Street Address (P.O. Box Number is Not Acceptable)					
		0000	Address (r. o. Dox nortider is not Acceptable)				
			83				
				84 City	F1 85	?ip Code	
or registen fami⊩ar wit	o the provisions of Sections 607,0502 ed agent, or both, in the State of Floric th, and accept the obligations of, Secti	and 607,1508, Florida Statut fa. Such change was authoriz on 607.0505, Florida Statutes	tes, the abo zed by the o s.	ve-named operation	corporation submits this statement for the purpose of changing its is board of directors. I hereby accept the appointment as registers	registered office ed agent. I am	
SIGNATURE: _	Signature, typed or printed name of registered agent	and title If applicable. (Nr.	OTE: Registered	Agent signature	e raquireo v/hen reinstating) DATE		
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECT	ORS IN 12	
TITLE	PVST	☐ DELETE	1. 1 T	ITLE	Change	Addition	
NAME	GENENDER, FELISA A		1.2 N/	AM®			
STREET ADDRESS	268 E. FLAGLER STREET		1.3 \$1	IREE1 ADDRESS	s		
CITY - ST - ZIP	MIAMI FL 33131		1.4 CI	1Y-SI-7IP			
TITLE	D	[12] DETE JE	2.17	ITLE	P Change	Addition	
NAME	GENENDER, FELISA A		2.2 N	AME .	JOSE MACHOLONSKI		
STREET ADDRESS	268 E. FLAGLER STREET		2.3 \$1	ireet address	6rg MANIDIAN AUE.		
CITY-ST-ZIP	MIAMI FL 33131		2.4 CI	TY-S1-ZIP	JOSE MACHODONSKI 6V9 MENIDIAN AVE. MIANI BENUL, F/ 33139		
TPLF		☐ DEFE1E		ITLE .	Change	Addition	
NAME			3.2 N/	AME			
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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 earth; that I am an officer or director of the corporation or the receiver or trustee empoyable 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.