## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT 1008



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

<b></b>	1990		<del></del>	_	
DOCUI	MENT # P9700	0006077 (6)			
3		3000011 (0)			
SPARK	Y COSMETICS, INC.				
Principal Plac	e of Business	Mailing Address	<del></del>		IKO OTITI DOTE JEDIT FOOT LOOT
550 BILTMOR	E WAY	550 BILTMORE WAY			
SUITE 890		SUITE 890		DO NOT WRITE IN THIS	PDACE
CORAL GABLES FL 33134		CORAL GABLES FL 33134		3. Date Incorporated or Qualified	
<b>j</b>				01/21/1997	
2. Principal P	lace of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26	<u> </u>	65-0725115	Not Applicable
Suite, Apt.	#, <b>et</b> c.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
Çity & State	2	City & State			Fee Required
23	•	28		6. Election Campaign Financing  Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid the cu	<del></del>
24	25	29	30	1 -	Yes No
	9. Name and Address of Currer	nt Registered Agent		10. Name and Address of New Registered	Agent
LOWE, JANET 81 Name				redric S. Brandt	
550 BILTMORE WAY			82 Street Add	ress (P.O. Box Number is Not Acceptable)	4 600
SUITE 890			83 35	O BITHOR WAY	#890
CO	RAL GABLES FL 33134			•	
}			84 City	ral Gables Fl	85 Zip Code
11 Pursuant	to the provisions of Sections 607 050	2 and 607 1508. Florida Statute:		poration submits this statement for the purpose of	of changing its registered
Office or r	egistered agent or both, in the State	of Florida, Such change was au	ithorized by the corporal	poration submits this statement for the purpose of tion's board of directors. I hereby accept the ap	pointment as registered
SIGNATURE	Thirty and the about the oblig	T'aal aa Da	andt	4-7-1	<b>ዓ</b> ጽ
SIGNATURE	Stand ure typod or printed name of registered age	nt and little if applicable (NÖTE:	Repistered Agent signature requi	ired when reinstating) DATE	
12.	OFFICERS AN	D DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AN	
TITLE	D ANDT EDEDDIC C	DELETE	1.1 TITLE		☐ Change ☐ Addition
NAME OTRECT ADDRESS	BRANDT, FREDRIC S 550 BILTMORE WAY, STE 89	Λ	1.2 NAME		
STREET ADDRESS CITY-ST-ZIP	CORAL GABLES FL 33134	V	1.3 STREET ADDRESS		
TITLE	COTTAL CADLES TE 00107	☐ DELETE	1.4 CITY - ST - ZIP 2.1 TITLE		☐ Change ☐ Addition
NAME			2.2 NAME		
STREET ADDRESS			2.3 STREET ADDRESS		
CITY-ST-ZIP			2.4 CITY-ST-ZIP		
TITLE		DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP		Driese	3.4. CITY-ST-ZIP		
TITLE		☐ DELETE	4.1 TITLE		Change Addition
NAME STREET ADDRESS			4. 2 NAME		
CITY-ST-ZIP			4.3 STREET ADDRESS		
TITLE		DELETE	5.1 TITLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		☐ DELETE	6.1 TITLE		Change Addition
NAME			6.2 NAME		
AVACEY ADDRESS			E & CTREET LODDEGO		

14. I hereby certify that the information supplied with this filting 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 supplementabannual 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.

AIANIATURE.

4-7-98

(305)443-6606

**FILED** 

Apr 23 1998 8:00am

Secretary of State