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FILED

Apr 29 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # P97000052711 (3)

1. Corporation Name

MIAMI'S YOUNG FACES, INC.

Principal Place of Business

Mailing Address

401 MIRACLE MILE SUITE 106
CORAL GABLES FL 33134

401 MIRACLE MILE SUITE 106
CORAL GABLES FL 33134

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

06/16/1997

4. FEI Number

65-0773478

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☒ No

2. Principal Place of Business

21 401 Miracle Mile
Suite, Apt. #, etc.

22 106

23 Coral Gables

24 33134

25 USA

2a. Mailing Address

26 6075 Roswell Rd.
Suite, Apt. #, etc.

27 118

28 Atlanta, Ga.

29 30328

30 USA

9. Name and Address of Current Registered Agent

VIERA, RICHARD
401 MIRACLE MILE SUITE 106
CORAL GABLES FL 33134

10. Name and Address of New Registered Agent

81 Name

Debra Montgomery - Vice President

82 Street Address

3891 Stirling Road

83 City

Ft. Lauderdale, FL

84 State

33312

85 Zip Code

33312

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.

SIGNATURE

Debra Montgomery

April 17, 1998

DATE

12. OFFICERS AND DIRECTORS

TITLE ☒ DELETE

NAME VIERA, RICHARD
STREET ADDRESS 401 MIRACLE MILE SUITE 106
CITY-ST-ZIP CORAL GABLES FL 33134

TITLE ☒ DELETE

NAME VIERA, MADELEIN
STREET ADDRESS 401 MIRACLE MILE SUITE 106
CITY-ST-ZIP CORAL GABLES FL 33134

TITLE ☐ DELETE

NAME ~~Vice President~~
AUSTIN, STEPHANIE
STREET ADDRESS 401 MIRACLE MILE SUITE 106
CITY-ST-ZIP CORAL GABLES FL 33134

TITLE ☒ DELETE

NAME ~~Sec. Treas.~~
KAREN GREER
STREET ADDRESS 401 Miracle Mile Suite 106
CITY-ST-ZIP Coral Gables, FL 33134

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

☐ Change ☐ Addition

14 NAME

15 STREET ADDRESS

16 CITY-ST-ZIP

17 TITLE ☐ Change ☐ Addition

18 NAME

19 STREET ADDRESS

20 CITY-ST-ZIP

21 TITLE ☐ Change ☒ Addition

22 NAME

23 STREET ADDRESS

24 CITY-ST-ZIP

25 TITLE ☐ Change ☒ Addition

26 NAME

27 STREET ADDRESS

28 CITY-ST-ZIP

29 TITLE ☐ Change ☐ Addition

30 NAME

31 STREET ADDRESS

32 CITY-ST-ZIP

33 TITLE ☐ Change ☐ Addition

34 NAME

35 STREET ADDRESS

36 CITY-ST-ZIP

37 TITLE ☐ Change ☐ Addition

38 NAME

39 STREET ADDRESS

40 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.

CP2E034 (10/97)