

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

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P98000000227

1. Corporation Name
YAMBAL COSMETICS CORP.

Principal Place of Business
38423 WASHINGTON LOOP ROAD
PUNTA GORDA FL 33982

Mailing Address
38423 WASHINGTON LOOP ROAD
PUNTA GORDA FL 33982

2. Principal Place of Business

21 Suite, Apt. #, etc

22 City & State

23 Zip Country

24 25

2a. Mailing Address

26 Suite, Apt. #, etc

27 City & State

28 Zip Country

29 30

9. Name and Address of Current Registered Agent

AMERILAWYER
343 ALMERIA AVENUE
CORAL GABLES FL 33134

81 Name
82 Spiegel & Utrera, P.A.
83 Street Address (P.O. Box Number is Not Acceptable)
84 343 Almeria Avenue
85 City
Coral Gables FL 33134

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation's director's 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 agree with the provisions of Section 607.0505, Florida Statutes.

SIGNATURE By: Natalia Utrera, Vice-President

12. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
[] DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
[] DELETE

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CITY-ST-ZIP
[] DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
[] DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE
12 NAME
13 STREET ADDRESS
14 CITY-ST-ZIP
[] Change [] Addition

21 TITLE
22 NAME
23 STREET ADDRESS
24 CITY-ST-ZIP
[] Change [] Addition

31 TITLE
32 NAME
33 STREET ADDRESS
34 CITY-ST-ZIP
[] Change [] Addition

41 TITLE
42 NAME
43 STREET ADDRESS
44 CITY-ST-ZIP
[] Change [] Addition

51 TITLE
52 NAME
53 STREET ADDRESS
54 CITY-ST-ZIP
[] Change [] Addition

61 TITLE
62 NAME
63 STREET ADDRESS
64 CITY-ST-ZIP
[] Change [] Addition

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(g), 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, upon an attachment with an address with all other like empowered.

SIGNATURE: N. Sanchez
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

98000000227



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

01/02/1998

4. FEI Number

65-0803979

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 the current year's Intangible

Personal Property Tax

10. Name and Address of New Registered Agent

600002259436--8
-04/30/99--01142--014
****150.00 ****150.00

045107

CR2E034 (11/98)