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

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## 1999

## DOCUMENT # P98000067627

1. Corporation Name

TREBOL COSMETICS, INC.

							(XI) 1881 1881
Principal Place of Business Mailing Address							
3501 NW 46TH STREET 3501 NW 46TH STREET							
MIAMI FL 33142 MIAMI FL 33142					DO NOT WRITE IN THI	S SPACE	
					3. Date Incorporated or Qualifed		
	,				08/03/1998	•	-
2. Principal P	lace of Business	2a Mailing Address			4. FEI Number	App	lied For
м		26			65-086219	Not	Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 A	dditional
22		27			5. Certificate of Status Desired	Fee Rec	quired
City & State		City & State		6. Election Campaign Financing	\$5.00		
23		28			Trust Fund Contribution	Added to	Fees
Zip	Country	Zip	Count	try	8. This corporation owes the current year I		п
24	25	29	30		Personal Property Tax.		□No
	9. Name and Address of Curren	t Registered Agent		1 Name	10. Name and Address of New Registere	a Agent	
מאח	DIG ELLIOTT		ſ	Name			
HARRIS, ELLIOTT 111 SW 3RD STREET			8	Street Add	dress (P.O. Box Number is Not Acceptable)		
	H FLOOR MCCORMICK BLDG		-	33			
•	WI FL 33130			33			
MIN	WI I E 33 130		1	34 City	F	85 Zip C	ode
					poration submits this statement for the purpose	<b>—</b> 1	rogistored
SIGNATURE	Signature, typed or printed name of registered ager	it and title if applicable (NOTI	Registered A	gent signature requir	red when reinstating) DATE  ADDITIONS/CHANGES TO OFFICERS /	AND DIRECTO	RS IN 12
TITLE	PD	DELETE	1,1 TITU	Ē		☐ Change	Addition
NAME	VILLALBA, NICOLAS JR	_	1.2 NAM	E			
STREET ADDRESS	AFAI MAK AATU ATOFFT		1.3 STR	EET ADDRESS		•	
CITY-ST-ZIP	MIAMI FL 33142			-ST-ZIP			
TITLE	VSTD	☐ DELETE	2.1 TITL			Change	☐ Addition
NAME	VILLALBA, DAVID		2.2 NAM	BE	•	•	
STREET ADDRESS	ACOUNTY JOSE ATTOCK		. 2.3 STR	EET ADDRESS			
CITY-ST-ZIP	MIAMI FL 33142		2 4 CIT	Y-ST-ZIP			
TITLE	AS	☐ DELETE	3.1 TITL	E	<del></del>	Change	
NAME	HARRIS, ELLIOTT		3.2 NAM	ıε		•	
STREET ADDRESS	11 SW 3RD STREET SIXTH FL	OOR	3.3 STR	EET ADORESS			
CITY-ST-ZIP	MIAMI FL 33130		3.4. CIT	Y-ST-ZIP			
TITLE		☐ DELETE	4.1 TITL	E		☐ Change	Addition
NAME			4. 2 NAJ	ME		. <b>.</b>	
STREET ADDRESS			4.3 STR	EET ADDRESS			
CITY-ST-ZIP				r-ST-ZIP		-	
TITLE		☐ DELETE	5.1 TITL			☐ Change	Addition
NAME			5.2 NAW		•		
STREET ADDRESS				EET ADORESS			
CITY-ST-ZIP				-ST-ZIP		Chan	□ Addition
TITLE	1	☐ DELETE	6.1 TTL	E		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)(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, with all other like empowered.

62 NAME

6.3 STREET ADDRESS

TITLE

NAME

STREET ADDRESS CITY-ST-ZIP

Mar 06, 1999 8:00 am Secretary of State

03-06-1999 90047 008 \*\*\*158.75