1/19/00-90223-004-$158.75-$158.75

FILED
Apr 18, 2000 8:00 am
Secretary of State
01-19-2000 90223 004 ***158.75

DOCUMENT # P99000075735

1. Entity Name
G'S COSMETICS INC.

C0005847

DO NOT WRITE IN THIS SPACE

Principal Place of Business	Mailing Address
6665 BOYNTON BEACH BLVD. BOYNTON BEACH FL 33436	6665 BOYNTON BEACH BLVD. BOYNTON BEACH FL 33437-3527

2. Principal Place of Business
Suite, Apt. #, etc.
City & State
Zip | Country

3. Mailing Address
12239 SUNSET POINT CIR.
Suite, Apt. #, etc.
City & State: WELLINGTON FL.
Zip: 33414 | Country

4. FEI Number: 65 0943325 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☒ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

D'AGOSTINO, GERRI
12239 SUNSET POINT CIR.
WELLINGTON FL 33414

7. Name and Address of New Registered Agent

Name: PASCO J D'AGOSTINO
Street Address (P.O. Box Number is Not Acceptable): 12239 SUNSET POINT CIR.
City: WELLINGTON FL Zip Code: 33414

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: Gerri D'Agostino Pasco J D'Agostino 1-10-00
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☒

FILE NOW!!! FEE IS $150.00
After MAY 1, 2000 Fee will be $550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ $5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☒ Addition PRESIDENT GERRI D'AGOSTINO 12239 SUNSET PT CIR. WELLINGTON FL 33414
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☒ Addition VICE PRESIDENT PASCO J D'AGOSTINO 12239 SUNSET PT CIR WELLINGTON FL 33414
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☒ Addition SECRETARY GERRI D'AGOSTINO 12239 SUNSET PT CIR WELLINGTON FL 33414
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☒ Addition TREASURE PASCO J D'AGOSTINO 12239 SUNSET PT CIR WELLINGTON FL 33414
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Gerri D'Agostino GERRI D'AGOSTINO 1-10-00 561-791-3629
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #