

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

95 MAY -1 AM 8:24

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **V17331** (2)

1. Corporation Name

BIO COSMETICS INTERNATIONAL, INC.

Principal Place of Business

**106 GRANADA LANE
PONTE VEDRA BEACH FL 32082**

Mailing Address

**P.O. BOX 754
PONTE VEDRA BEACH FL 32082**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

02/27/1992

3a. Date of Last Report

04/11/1994

4. FEI Number

59-3126893

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. The corporation has liability for intangible tax under § 199.032,
Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

2a. Mailing Address

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**COLEMAN, DONALD RAY, JR
333-1 EAST MONROE STREET
JACKSONVILLE FL 32202**

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85

Zip Code

11. Pursuant to the provisions of Sections 607.0202 and 607.1508, Florida Statutes, the above named corporation submits the 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 607.0203, Florida Statutes.

SIGNATURE

(Print Name of the Agent or Registered Office Representative)

(Print Signature of Agent or Registered Office Representative)

12. OFFICERS AND DIRECTORS

13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS (If 12)

12.1	P
NAME	HITE, ELLINORE I.
STREET ADDRESS	106 GRANADA LANE
CITY & STATE	PONTE VEDRA BCH FL 32082
12.2	VS
NAME	HITE, WILLIAM L.
STREET ADDRESS	106 GRANADA LANE
CITY & STATE	PONTE VEDRA BCH FL 32082
12.3	
NAME	
STREET ADDRESS	
CITY & STATE	
12.4	
NAME	
STREET ADDRESS	
CITY & STATE	
12.5	
NAME	
STREET ADDRESS	
CITY & STATE	
12.6	
NAME	
STREET ADDRESS	
CITY & STATE	
12.7	
NAME	
STREET ADDRESS	
CITY & STATE	

13.1	☐ Change ☐ Addition
13.2	
13.3	☐ Change ☐ Addition
13.4	
13.5	☐ Change ☐ Addition
13.6	
13.7	☐ Change ☐ Addition
13.8	
13.9	☐ Change ☐ Addition
13.10	
13.11	☐ Change ☐ Addition
13.12	
13.13	☐ Change ☐ Addition
13.14	
13.15	☐ Change ☐ Addition
13.16	
13.17	☐ Change ☐ Addition
13.18	
13.19	☐ Change ☐ Addition
13.20	

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and is true, not subject to the exemption stated in the laws of the State of Florida. I further certify that the information submitted 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 registered office of the corporation for the purpose of this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 of this filing. I am an officer or director of the corporation.

SIGNATURE: *Ellinore I Hite* **ELLINORE I HITE**

4/27/95

904-285-1576