

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # V68336

1. Entity Name
DREAM COSMETICS, INC.

FILED
Feb 13, 2001 8:00 am
Secretary of State

02-13-2001 90592 049 ***150.00

Principal Place of Business

ROUTE 612 E
VERONA VA 24482
US

Mailing Address

963 LAUREL HILL RD
VERONA VA 24482
US

00017006



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number 59-3144221

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

MCCORMICK, LINDA K
115 S HUNTING LODGE DRIVE
INVERNESS FL 34453

7. Name and Address of New Registered Agent

Name

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

2060 Cormorant Drive

City

Palm Harbor

FL

Zip Code

39683

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

Linda K. McCormick

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, 2001 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

TITLE P
NAME ROSHAK, CYNTHIA L
STREET ADDRESS RT 1 BOX 92A
CITY-ST-ZIP VERONA VA 24482 ☐ Delete

TITLE ST
NAME MCCORMICK, LINDA
STREET ADDRESS 115 S HUNTING LODGE DRIVE
CITY-ST-ZIP INVERNESS FL 34453 ☐ Delete

TITLE M
NAME ROSHAK, MICHAEL J
STREET ADDRESS RT 1 BOX 92A
CITY-ST-ZIP VERONA VA 24482 ☐ Delete

TITLE M
NAME ULMER, DANIEL R
STREET ADDRESS RT 1 BOX 92A
CITY-ST-ZIP VERONA VA 24482 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS 963 Laurel Hill Rd
CITY-ST-ZIP VERONA VA 24482 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS 2060 Cormorant Drive
CITY-ST-ZIP Palm Harbor, FL 39683 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS 963 Laurel Hill Rd.
CITY-ST-ZIP Verona, VA 24482 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS 963 Laurel Hill Rd.
CITY-ST-ZIP Verona, VA 24482 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

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:

Cynthia Roshak Cynthia Roshak

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

1/11/01 (540) 248-0980

CR2E034 (10/00)