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**PROFIT CORPORATION ANNUAL REPORT** 

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

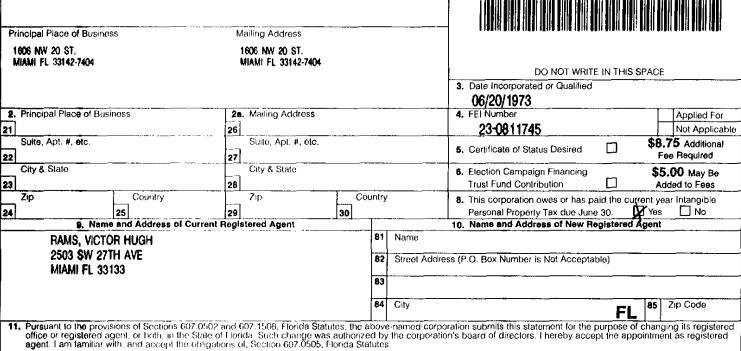
DOCUMENT #

428690

PERFUMERIA SELENE INC

Principal Place of Business Mailing Address 1806 NW 20 ST. 1606 NW 20 ST.

## FILED May 04 1998 8:00am Secretary of State



SIGNATURE Signature typical or professionare of registered agrees and talle if applicable (NXTE: Registered Agreet signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. PD DELETE Change Addition TITLE 1.1 TITLE **GONZALEZ.OSCAR** NAME 1.2 NAME 1051 SW 1ST ST.#203 STREET ADDRESS 1.3 STREET ADDRESS MIAMI FL CITY-ST-7IP 1 # CITY - \$1 - 2IP TITLE DELETE 2.1 TITLE Change ☐ Addition MILAN, CIRA G 2.2 NAME 6500 SW 93 AVE STREET ADDRESS 2.3 STREET ADDRESS MIAMI FL CITY-ST-ZIP 2. 4 CITY - ST - ZIP DELETE Addition TITLE 3.1 TITLE ☐ Change MILAN, DANIEL O NAME 3.2 NAME 6500 SW 93 AVE STREET ADDRESS 3.3 STREET ADDRESS MIAMI FL CITY-ST-ZIP 3.4 CITY-ST-ZIP DELETE TITLE Change Addition 4.1 TITLE 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 City - St - ZiP DELETE Change Addition 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY - ST - ZIP 5.4 CITY - ST - ZIP DELETE Addition TITLE 61 TITLE NAME 6.2 NAME 6.3 STREET ADDRESS STREET ADDRESS

CITY-ST-ZIP 14. Thereby 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 eath; 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.

GIRA G. HILIAN, V. PRES. 11/27/98 (305) SIGNATURE: