

2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# 641309

Entity Name: PARIS PERFUMES, INC.

FILED
Jun 18, 2008
Secretary of State

Current Principal Place of Business:

4530 N. JEFFERSON AVENUE
MIAMI BEACH, FL 33140

New Principal Place of Business:

Current Mailing Address:

4530 N. JEFFERSON AVENUE
MIAMI BEACH, FL 33140

New Mailing Address:

FEI Number: 59-1957380

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COHEN, MOISE
4530 N JEFFERSON AVE
MIAMI BEACH, FL 33140 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: COHEN, MOISE,
Address: 4530 N. JEFFERSON AVE
City-St-Zip: MIAMI BEACH, FL

Title: ST () Delete
Name: COHEN, HELYETT,
Address: 4530 N. JEFFERSON AVE
City-St-Zip: MIAMI BEACH, FL

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: COHEN, MOISE
Address: 4530 N. JEFFERSON AVE
City-St-Zip: MIAMI BEACH, FL

Title: ST (X) Change () Addition
Name: COHEN, HELYETT
Address: 4530 N. JEFFERSON AVE
City-St-Zip: MIAMI BEACH, FL

Title: VP () Change (X) Addition
Name: OFIR, YUVAL
Address: 4530 N. JEFFERSON AVE
City-St-Zip: MIAMI BEACH, FL

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MOISE COHEN

PD

06/18/2008

Electronic Signature of Signing Officer or Director

Date