

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F03000006299

Entity Name: DANA CLASSIC FRAGRANCES, INC.

FILED
May 13, 2009
Secretary of State

Current Principal Place of Business:

720 S POWERLINE RD
STE D
DEERFIELD BEACH, FL 33442

New Principal Place of Business:

Current Mailing Address:

720 S POWERLINE RD
STE D
DEERFIELD BEACH, FL 33442

New Mailing Address:

FEI Number: 20-0441439

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: CEO () Delete
Name: COHEN, ISAAC F
Address: 720 S POWERLINE RD STE D
City-St-Zip: DEERFIELD BEACH, FL 33442

Title: SECY () Delete
Name: MCGOVERN, JEFFREY B ESQ.
Address: 720 S POWERLINE RD, STE D
City-St-Zip: DEERFIELD BEACH, FL 33442

Title: COO () Delete
Name: ZAMARELLI, GINA
Address: 720 S POWERLINE RD, STE D
City-St-Zip: DEERFIELD BEACH, FL 33442

Title: CIO (X) Delete
Name: GRUSKIN, SCOTT
Address: 720 S POWERLINE RD, STE D
City-St-Zip: DEERFIELD BEACH, FL 33442

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CEO (X) Change () Addition
Name: GILIOTTI, EMIL
Address: 720 S POWERLINE RD STE D
City-St-Zip: DEERFIELD BEACH, FL 33442

Title: SECY (X) Change () Addition
Name: DERMAN, MYRON
Address: 720 S POWERLINE RD, STE D
City-St-Zip: DEERFIELD BEACH, FL 33442

Title: CFO (X) Change () Addition
Name: SIENKIEWICZ, JOSEPH
Address: 720 S POWERLINE RD, STE D
City-St-Zip: DEERFIELD BEACH, FL 33442

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: JEFFREY MCGOVERN

GC

05/13/2009

Electronic Signature of Signing Officer or Director

Date