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

PROFIT CORPORATION ANNUAL REPORT



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

1996

DOCUMENT #

G08743

(8)

THE SOUTHERN FRAGRANCE COMPANY LTD., INC.							
Principal Place of Business 7475 N.W. 57TH STREET TAMARAC FL 33319		Mailing Address 7475 N.W. 57TH STREET TAMARAC FL 33319		1 1001111 8811 83197 1914 (8811 618)	DE IIII BIBRI QUBII QUQU BRE	A BARAK MAMAK AMMA	
					3. Date Incorporated or Qualified 11/18/1982	3a. Date of Last F 02/03/19	
2. Prinopal Place of Business 1		2a. Mailing Address 26		4. FEI Number 59-2245541	Applied For Not Applicable		
Suite, Apt. #, etc. 2		Suite, Apt. #, etc. 27		5. Certificate of Status Desired	\$8.75 Additional Fee Required		
City & State		City & State		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees		
7ip Country 25		Zip 29			8. This corporation has liability for intangible tax under s 199.032, Florida Statutes		
	9. Name and Address of Curr	ent Registered Agent			10. Name and Address of New F	legistered Agent	
			8	1 Name			
GARFINKLE, HAROLD 830 NW 81ST TERRACE			8		ess (P.O. Box Number is Not Acceptat	ole)	
PLANTA	TION FL 33324		8				
			8	4 City		FL 85 Z	ip Code
SIGNATURE	n, and accept the obligations of, Se squators, typical or printed name of registrated agin OFFICERS A		(NOTE: Registered A	ent signature require	d when reinstaling) ADDITIONS/CHANGES TO OFF	DA1E.	DRS IN 12
116	PD	☐ DELETE	1. 1 TITL	F T		☐ Change	Addition
NAM:	GARFINKLE, HAROLD		1.2 NAM	E			_
SPREET ADDRESS	830 N W 81ST TERRACE		1.3 STRE	ET ADDRESS			
CITY-ST-ZIF	PLANTATION FL	· · · · · · · · · · · · · · · · · · ·	1.4 City	-ST-ZIP			
IIILE			2 1 ไปไม	E		☐ Change	■ Addition
NAME			2 2 NAM	1			
STREET ADORESS CHY+ST-ZIP				ET ADDRESS			
THEF		DELETE	2 4 CITY 3 1 TITL			Change	Addition
VAME		_ necess	3 2 NAM	1		Change	☐ Vagation
STREET ADDRESS				ET ADDRESS			
CHY-ST ZIP			3.4 CHY	- ST - ZIP			
leteF		DELETE	4. 1 TITL	F		☐ Change	Addition
VAVE			4.2 NAM	Ε			
STREET ADORESS			4.3 \$TRE	ET ADDRESS			,
City-St Zin		- Delete		· ST · ZIP			
TITLE NAME:		☐ DELETE	5 1 TITL			☐ Change	Addition
NAME STREET ADDRESS			5.2 NAM				
City-\$1-7iF			5.3 STATE 5.4 CHTY	ET ADDRESS			
1 11.1	The second secon	DELETE	6 1 TITL			☐ Change	Addition
NAME			6.2 NAM	·		☐ - 8°	
STREET ADDRESS				ET ADDRESS			
C 1Y+ST+ZiP			6.4 CHTY				
					or the exemption stated in Section 119		

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIR

1/17/96 954 32,19230