2006 FOR PROFIT CORPORATION ANNUAL REPORT

Secretary of State DOCUMENT # K09544 01-23-2006 90053 042 ***150.00 LORRAINE PERFUME CO., INC. Principal Place of Business Maiting Address 32 NE 1ST AVENUE 32 NE 1ST AVENUE HALLANDALE, FL 33009 HALLANDALE, FL 33009 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 01182006 Chg-P CR2E034 (11/05) City & State City & State 4. FEI Number Applied For 65-0038399 Not Applicable Zip Country Zw Country \$8.75 Additional 5. Certificate of Status Desired П Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent COHEN, LOUIS Street Address (P.O. Box Number is Not Acceptable) 32 NE 1ST AVENUE HALLANDALE, FL 33009 Zip Code 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE. Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent scondure required when registered) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. PΠ MLE Delete TILE ☐ Change ☐ Addition COHEN, LOUIS MAME NAME STREET ADDRESS 32 NE 1ST AVENUE STREET ADDRESS HALLANDALE, FL CITY-ST-7IP CITY, ST. 709 Delete TIFLE TITLE ☐ Change ☐ Addition MESSIER, MARNIE NAME 32 NE 1ST AVENUE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP HALLANDALE, FL 33009 CITY-ST-ZIP ☐ Delete ☐ Change ■ Addition COHEN, NETTIE NAME NAME STREET ADDRESS 32 NE 1ST AVENUE STREET ADDRESS HALLANDALE, FL 33009 CITY-ST-70 CITY-ST-78P TIRE □ Delete ☐ Change ■ Addition NAME SPACEK, LORRAINE STREET ADDRESS 32 NE 1ST AVENUE STREET ADDRESS HALLANDALE, FL 33009 CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Change Addition COHEN, DARYL NAME HASE STREET ADDRESS 32 NE 1ST AVENUE STREET ADDRESS CITY-ST-ZIP HALLANDALE, FL 33009 CITY-ST-ZIP TILE ☐ Change ■ Addition C Delete TITLE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. I hereby certify that the information supplied with this fiting does not qualify for the exemptions contained 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 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 10 or Block 11 if charged, or on an attachment with an address, with all other like empowered.

NETTIE

FILED

Jan 23, 2006 8:00 am