

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000022604

FILED
Apr 30, 2008
Secretary of State

Entity Name: DESIGNER FRAGRANCE WHOLESALE, L.L.C.

Current Principal Place of Business:

1172 NW 163RD DRIVE
MIAMI, FL 33169

New Principal Place of Business:

15895 NW 15 AVE
MIAMI, FL 33169

Current Mailing Address:

1172 NW 163RD DRIVE
MIAMI, FL 33169

New Mailing Address:

15895 NW 15 AVE
MIAMI, FL 33169

FEI Number: 90-0100802

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LEVY, MICHAEL
250 NORTH DIXIE HIGHWAY, SUITE 12
HOLLYWOOD, FL 33020 US

Name and Address of New Registered Agent:

EFRONI, EMANUEL
15895 NW 15 AVE
MIAMI, FL 33169 US

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: EMANUEL EFRONI

04/30/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: E.T. PERFUMES, INC.,
Address: 1172 NW 163RD DRIVE
City-St-Zip: MIAMI, FL 33169

Title: MGRM () Delete
Name: DESIGNER FRAGRANCE W, HOLESale, INC.
Address: 250 NORTH DIXIE HIGHWAY, SUITE 12
City-St-Zip: HOLLYWOOD, FL 33020

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: E.T. PERFUMES, INC.,
Address: ECKER SERVICE CORP
City-St-Zip: MIAMI, FL 33169

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 is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: EMANUEL EFRONI

MGRM

04/30/2008

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date