2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000049277

Entity Name: MEGA PERFUME GAINESVILLE, LLC

6601 LYONS ROAD, SUITE G7

COCONUT CREEK, FL 33073 US

Address:

City-St-Zip:

FILED Apr 24, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 6419 NEWBERRY ROAD GAINESVILLE, FL 32605 US **Current Mailing Address: New Mailing Address:** 6601 LYONS ROAD SUITE G7 COCONUT CREEK, FL 33073 US FEI Number: 26-2646281 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: LIVNI, RON 6601 LYONS ROAD SUITE G7 COCONUT CREEK, FL 33073 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: Electronic Signature of Registered Agent Date MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES: MGRM () Delete Title: () Change () Addition LIVNI, RON Name: Name: Address: 6601 LYONS ROAD, SUITE G7 Address: City-St-Zip: COCONUT CREEK, FL 33073 US City-St-Zip: Title: MGRM Title: () Delete () Change () Addition Name: GAL, BEN Name: Address: 6601 LYONS ROAD, SUITE G7 Address: City-St-Zip: COCONUT CREEK, FL 33073 US City-St-Zip: Title: MGRM (X) Delete Title: () Change () Addition ZAGURI, AVI Name: Name:

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.

Address:

City-St-Zip:

SIGNATURE: RON LIVNI PRES 04/24/2009