

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Mar 21, 2006 8:00 am**  
**Secretary of State**

03-21-2006 90010 008 \*\*\*\*75.00

**DOCUMENT # N01000007829**

1. Entity Name

AROMAS DE PUERTO RICO OF FLORIDA, INC.



Principal Place of Business

4663 MARTHA LOUISE DR  
W.P.B.  
W PALM BCH FL 33417

Mailing Address

4663 MARTHA LOUISE DR  
W.P.B.  
W PALM BCH FL 33417

2. Principal Place of Business

4663 Martha Louise Dr

Suite, Apt. #, etc.  
West Palm Beach

City & State  
Florida

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

33417

Country

Palm Beach

Zip

Country

4. FEI Number

66-0609989

Applied For

Not Applicable

5. Certificate of Status Desired

☒

\$8.75 Additional  
Fee Required

1st MOORE

CR2E037 (10/05)



6. Name and Address of Current Registered Agent

ORTIZ, CARMEN O  
4663 MARTHA LOUISE DR  
W PALM BCH FL 33417

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

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

CARMEN Olga Ortiz

Carmen Olga Ortiz

3-8-06

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reappointing)

DATE

**FILE NOW: FEE IS \$61.25**  
**Due By May 1, 2006**

9. Election Campaign Financing  
Trust Fund Contribution.

☒

**\$5.00 May Be**  
**Added to Fees**

**Make Check Payable to**  
**Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE PF ☐ Delete  
NAME ORTIZ, CARMEN O  
STREET ADDRESS 4663 MARTHA LOUISE DR  
CITY-ST-ZIP W PALM BCH FL 33417

TITLE C ☐ Delete  
NAME MERCADO, LIZETTE  
STREET ADDRESS 5268 EL BOSQUE LN #28  
CITY-ST-ZIP W PALM BCH FL 33415

TITLE S ☐ Delete  
NAME CRUZ, CARMEN  
STREET ADDRESS 1165 D SUMMIT TRAIL CIR  
CITY-ST-ZIP WEST PALM BEACH FL 33415

TITLE T ☐ Delete  
NAME RIVERA, FELIX  
STREET ADDRESS SUMMIT TRAIL CIRC 1165 D  
CITY-ST-ZIP WEST PALM BEACH FL 33415

TITLE D ☐ Delete  
NAME BLANCO, FRIDALIZ M  
STREET ADDRESS 4663 MARTHA LOUISE DR  
CITY-ST-ZIP WEST PALM BEACH FL 33417

TITLE T ☐ Delete  
NAME MANGUAL, ANA  
STREET ADDRESS 121 ROSEWOOD LN  
CITY-ST-ZIP GREENACRES FL 33463

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

CARMEN Olga Ortiz

3-8-06

(561)

822-4560