


**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Sep 09, 2004 08:00 AM
Secretary of State

DOCUMENT # P01000099161 1. Entity Name MYSTIQUE PERFUMES, INC.	
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Principal Place of Business YVELINE FRANCIOS 8059 DEERWOOD CIRCLE TAMPA, FL 33610	Mailing Address YVELINE FRANCIOS 8059 DEERWOOD CIRCLE TAMPA, FL 33610
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08092004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 48-1304085	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent

FRANCOIS, YVELINE
8059 DEERWOOD CIRCLE
TAMPA, FL 33610

**DO NOT WRITE
IN THIS SPACE**

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 signature required when reinstating)

DATE

8/9/04

**FILE NOW!!! FEE IS \$550.00
Due by September 8, 2004**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D FRANCOIS, YVELINE 8059 DEERWOOD CIRCLE TAMPA, FL 33610
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09/09/04-80003-012 550.00

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: 
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8/9/04 813-966-0735
Date Daytime Phone #