

FILED
Jul 19, 2004 8:00 am
Secretary of State

07-19-2004 90008 001 ***150.00

**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # P02000076034

1. Entity Name
MINISTRY OF FRAGRANCE, INC.



Principal Place of Business
**400 MISTY OAKS RUN
CASSELBERRY, FL 32707**

Mailing Address
**400 MISTY OAKS RUN
CASSELBERRY, FL 32707**

54063350



07022004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FBI Number
30-0108583

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**BARD, SHELLEY A
400 MISTY OAKS RUN
CASSELBERRY, FL 32707**

**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

**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	D
NAME	BARD, SHELLEY A
STREET ADDRESS	400 MISTY OAKS RUN
CITY-ST-ZIP	CASSELBERRY, FL 32707
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**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)(i), 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

Date

Daytime Phone #

2 Jul 04 *407831 0998*

Patrick M. Burns, CPA, PA

Accountants, Consultants, and Tax Professionals

Attachment

#P02000076034

July 8, 2004

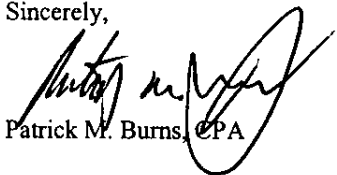
Division of Corporations
PO Box 6198
Tallahassee, FL 32314

RE: Ministry of Fragrance, Inc.

Dear Sir or Madam:

Please note that I represent the above taxpayer in all federal, state, and local tax matters. I am in receipt of the enclosed notice regarding the taxpayers 2004 For Profit Corporation Annual Report. Please note that the taxpayer did not receive the notice and was not aware of the need to file his annual report. Enclosed please find his annual report and check #7008 in the amount of \$150.00. The taxpayer and I respectfully request the removal of any late fees and penalties due. Should you have any questions, please feel free to contact me directly at (407) 228-4443. Thank you for your assistance in this matter.

Sincerely,



Patrick M. Burns, CPA