

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # P03000088674

1. Entity Name

S SCENTS, INC.



DO NOT WRITE IN THIS SPACE

FILED
04 AUG -4 AM 10:19
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
12262 NW 1 Street

Suite, Apt. #, etc.

3. Mailing Address
P.O. Box 550072

Suite, Apt. #, etc.

City & State
Plantation, Florida

City & State
Ft. Lauderdale, Florida

4. FEI Number
04-3771346

Applied For
Not Applicable

Zip
33325

Country
United States

Zip
33355-0072

Country
United States

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

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IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name Spiegel & Utrera, P.A.

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

1840 Coral Way, 4th Floor

City Miami

FL Zip Code
33145

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

500040224925

08/17/04--01004--007 **150.00

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

Make Check Payable to Florida Department of State

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
DPS
Atlas A. Mujahid
12262 NW 1 Street, Plantation, Florida 33325

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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NAME
STREET ADDRESS
CITY-ST-ZIP
T
Abdulahakim Yusef
12262 NW 1 Street, Plantation, Florida 33325

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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 on an attachment with an address, with all other like empowered.

SIGNATURE:

Atlas A. Mujahid

7/30/04

(954) 347-4858

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone

CR2E034B (12/02)

AFFIDAVIT IN SUPPORT OF
REQUEST TO WAIVE THE
FLORIDA DEPARTMENT OF STATE
CORPORATE ANNUAL REPORT LATE FEES

STATE OF FLORIDA)
)
COUNTY OF BROWARD)

1. Atlas A. Mujahid is a President of S SCENTS, INC., a Florida corporation, (hereinafter "Corporation").

2. That the Corporation failed to file its 2004 Uniform Business Report or pay the 2004 Uniform Business Report filing fee within the time prescribed by Florida Statutes Chapter 607 because:

2.1 the written notice and requirements for filing the Annual Report and pay the Annual Report fee to the Florida Department of State was never received by the Corporation; and,

3. The Corporation requests the Florida Department of State waive the late fee for the Corporation upon the payment by the Corporation of its 2004 Uniform Business Report filing fee, which are presented simultaneously with this Affidavit.

4. S SCENTS, INC. satisfies the requirements of the Florida Statutes 607.0401.

Dated: 30 day of July, 2004

FURTHER, AFFIANT SAYETH NOT

S SCENTS, INC.

By: 

Atlas A. Mujahid, President

File M-30 001 48 2890

SWORN AND SUBSCRIBED

before me this 30 day of July, 2004.



Notary Public, State of Florida at Large

Printed Name: Melody A. Cassanova Brooks

Commission Expires: 9-22-06

OFFICIAL NOTARY SEAL MELODY A CASSANOVA BROOKS NOTARY PUBLIC STATE OF FLORIDA COMMISSION NO. DD152099 MY COMMISSION EXP. SEPT 22 2006
