

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P06000048195

Entity Name: AROMESSENCE, INC.

**FILED**  
**Mar 09, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

1610 LENOX AVE #516  
MIAMI BEACH, FL 33139 US

**New Principal Place of Business:**

**Current Mailing Address:**

1610 LENOX AVE #516  
MIAMI BEACH, FL 33139 US

**New Mailing Address:**

FEI Number: 20-4609560

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

O'NEILL, MICHELLE T V  
1610 LENOX AVE #516  
MIAMI BEACH, FL 33139 US

**Name and Address of New Registered Agent:**

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

**OFFICERS AND DIRECTORS:**

Title: P  
Name: CUESTA, IRENE M P  
Address: 13874 SW 75TH STREET  
City-St-Zip: MIAMI, FL 33183 US

Title: VP  
Name: O'NEILL, MICHELLE T VP  
Address: 1610 LENOX AVENUE #516  
City-St-Zip: MIAMI BEACH, FL 33139 US

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: MICHELLE O'NEILL

VP

03/09/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date