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PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P93000053987 (2)

1. Corporation Name
THE PERFUME HOUSE, INC.



Principal Place of Business 121 SOUTHEAST FIRST STREET SUITES 806 - 807 MIAMI FL 33131 US		Mailing Address 121 SOUTHEAST FIRST STREET SUITES 806 - 807 MIAMI FL 33131-1413 US	
3. Date Incorporated or Qualified 07/29/1993		3a. Date of Last Report 06/14/1996	
2. Principal Place of Business 21 200 Biscayne Blvd way Suite, Apt. #, etc. 22 # 11E City & State 23 MIA FL Zip 24 33131 Country 25 EEUU.		2a. Mailing Address 26 200 Biscayne Blvd way Suite, Apt. #, etc. 27 # 11E City & State 28 MIA FL Zip 29 33131 Country 30 EEUU.	
9. Name and Address of Current Registered Agent GRACIELA, ALGARBE 121 SOUTHEAST FIRST STREET SUITES 806 - 807 MIAMI FL 33131		10. Name and Address of New Registered Agent 81 NAME 82 STREET ADDRESS (P.O. Box Number is Not Acceptable) 83 # 11E 84 City 85 Zip Code	

11. Pursuant to the provisions of Sections 607.0607 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent or both in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE *[Signature]* DATE 4/22/97

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	NAME	1.1 TITLE	1.2 NAME
STREET ADDRESS	101 GRACIELA, ALGARBE	1.3 STREET ADDRESS	1.4 CITY - ST - ZIP
CITY - ST - ZIP	102 121 SOUTHEAST STREET, SUITES 806-807	2.1 TITLE	2.2 NAME
	103 MIAMI FL	2.3 STREET ADDRESS	2.4 CITY - ST - ZIP
TITLE	NAME	3.1 TITLE	3.2 NAME
STREET ADDRESS		3.3 STREET ADDRESS	3.4 CITY - ST - ZIP
CITY - ST - ZIP		4.1 TITLE	4.2 NAME
		4.3 STREET ADDRESS	4.4 CITY - ST - ZIP
TITLE	NAME	5.1 TITLE	5.2 NAME
STREET ADDRESS		5.3 STREET ADDRESS	5.4 CITY - ST - ZIP
CITY - ST - ZIP		6.1 TITLE	6.2 NAME
		6.3 STREET ADDRESS	6.4 CITY - ST - ZIP

14. I do 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 annual report or supplemental annual 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 12 or Block 13, if changed, or in an attachment with an address.

SIGNATURE *[Signature]* DATE 4/22/97

CR2E034 (9/96)