## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

P94000007188 (3)

S.J.J. PERFUMES, INC.

Malling Address

## FILED Jan 21 1998 8:00am Secretary of State



1 Thiotpairt	ace of Bosiness	Mailing Address	alling Address					
233 NW 96TH STREET MIAMI FL 33127		233 NW 36TH STREET	٢					
MIAMI FL	33127	MIAM) FL 33127			DO NOT WRITE IN THIS	SPACE		
					3. Date Incorporated or Qualified			
1					01/20/1994			
2. Principal Place of Business 2a, Mailing Address					4, FEI Number	1	Applied For	
21		26			65-0486820	<del></del>	lot Applicable	
Suite, Ar	ot. #, etc.	Suite, Apt #, etc.	Suite, Apt #, etc.				Additional	
22		27			5. Certificate of Status Desired		Pequired	
City & St	ate	City & State	City & State		6. Election Campaign Financing	6. Election Campaign Financing \$5.00 May Be		
23	28				Trust Fund Contribution			
Zip	Country	Zip	Countr	у	8. This corporation owes or has paid the cur	rent year Ir	ntangible	
24	25	29	30		Personal Property Tax due June 30. Yes No			
	9. Name and Address of Current	t Registered Agent		· 1 · · · · · · · · · · · · · · · · · ·	10. Name and Address of New Registered	Agent		
DOYLE, ALLAN [8					81 Name			
175 FOUNTAINBLEAU BLVD.				82 Street Address (P.O. Box Number is Not Acceptable)				
MIAMI FL								
			83					
			84	City	F=1	<b>85</b> Zip	Code	
## Durgues	t to the erguinians of Cactions 507 0500	and CO7 1500 Florida Ctatu	ton the shor	l named	FL.		Sha an adiata and	
11. Pursuant to the provisions of Sections 607.0502 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, typed or printed name of registered agen	(NO.	IF Panistored Ac	ent pignature	required when reinstating) DATE			
12,	OFFICERS AND		13.	er a Bigilatore	ADDITIONS/CHANGES TO OFFICERS AND	DIRECTO	BS IN 12	
TITLE	DP	DELETE	1.1 TITLE	•	(105(110)10)011111020 10 01 1102110 1111	Change	Addition	
NAME	ELUL, YOSEF		1.2 NAME				_	
STREET ADDRES	A-A- DIG ( DIG ( ) ) A-A-		1.3 STREE	T ADDRESS			[	
CITY-ST-ZIP	HOLLYWOOD FL 33021		1,4 CITY -					
TITLE	S	☐ DELETE	2.1 TITLE		3	Change	Addition	
NAME	COHEN, SARA		2.2 NAME		ELUL SARA			
STREET ADDRESS	AP45 BIA I BU ( ) ( AP		2.3 STREE	ADDRESS	3725 picadily 57			
CITY-ST-ZIP	HOLLYWOOD FL 33021		2. 4 CITY-		ELUL SARAITY ST 3735 picadilly ST Howyword PL 33021			
TITLE		☐ DELETE	3.1 TITLE			Change	Addition	
NAME			3.2 NAME				·	
STREET ADDRESS			3 3 STREET	ADDRESS				
CITY - ST - ZIP			3.4. CHY-	ST - ZIP				
TITLE		DELETE	4.1 TITLE			Change	Addition	
NAME			4. 2 NAME				[	
STREET ADDRESS			4.3 STREET	ADDRESS				
CITY-ST-ZIP	<u> </u>		4.4 CITY - 5	ST-ZIP				
TITLE		☐ DELETE	5.1 TITLE			Change	Addition	
NAME			5.2 NAME					
STREET ADDRESS	:		5.3 STREET	ADDRESS				
CITY-ST-ZIP	<u>                                     </u>		5.4 CITY - S	ST-ZIP				
TITLE		DELETE	6.1 TITLE			Change	Addition	
NAME			6.2 NAME	i				
STREET ADDRESS	. [		63 STREET	ADDRESS			]	
CITY-ST-ZIP	<u>                                      </u>		6 4 CITY - S	ST-ZIP			Ì	
14 Lhoroby	cortify that the information even led wit	h this filing does not another.			d in Castion 110 07/3/// Florida Statutas I further as	differ that 44.	. :-4:	

14. 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 annual report or suppliemental arrival 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 on an attachment with an address.

CONTINUE YOUR CLL YOSEP FLUL

1/12/18

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