

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000022629

Entity Name: AMAZING ODOR CONTROL, INC.

FILED  
Apr 16, 2009  
Secretary of State

## Current Principal Place of Business:

9600 W. SAMPLE ROAD, # 303  
CORAL SPRINGS, FL 33061

## New Principal Place of Business:

2015 N.W. 127TH TERRACE  
CORAL SPRINGS, FL 33071

## Current Mailing Address:

2015 NW 127 TERRACE  
CORAL SPRINGS, FL 33071

## New Mailing Address:

2015 N.W. 127TH TERRACE  
CORAL SPRINGS, FL 33071

FEI Number: 65-0482741

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

COHEN, ELLIE  
9600 WEST SAMPLE ROAD #303  
CORAL SPRINGS, FL 33065 US

## Name and Address of New Registered Agent:

COHEN, ELLIE  
2015 N.W. 127TH TERRACE  
CORAL SPRINGS, FL 33071 US

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:

04/16/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: COHEN, ELLIE  
Address: 9600 W. SAMPLE ROAD, # 303  
City-St-Zip: CORAL SPRINGS, FL 33061

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: COHEN, ELLIE  
Address: 2015 N.W. 127TH TERRACE  
City-St-Zip: CORAL SPRINGS, FL 33071

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: ELLIE COHEN

PD

04/16/2009

Electronic Signature of Signing Officer or Director

Date