

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Linda B. Norment
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

30 MAY -1 AM 3:19

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P94000060849 (4)

1. Corporation Name

J AND C PERFUMES CO. INC.

Principal Place of Business

10750 S.W. 24TH STREET
MIAMI FL 33165

Mailing Address

10750 S.W. 24TH STREET
MIAMI FL 33165

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 08/18/1994
3a. Date of Last Report

4. FEI Number 62-0213331
Applied For Not Applicable

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

6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under S. 199.012 Florida Statutes. ☒ Yes ☐ No

2. Principal Place of Business

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2a. Mailing Address

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9. Name and Address of Current Registered Agent

GARCIA, FELIX C
10750 S.W. 24TH STREET
MIAMI FL 33165

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.014(2) and 607.150(1) 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 607.014(2) Florida Statutes.

SIGNATURE

12. OFFICERS AND DIRECTORS

TITLE PSD
NAME ORTIZ, JUAN C
STREET ADDRESS 923 S.W. 119TH COURT
CITY OF FLA MIAMI FL 33184

TITLE VTD
NAME ORTIZ, CONRADO
STREET ADDRESS 923 S.W. 119TH COURT
CITY OF FLA MIAMI FL 33184

TITLE
NAME
STREET ADDRESS
CITY OF FLA

TITLE
NAME
STREET ADDRESS
CITY OF FLA

TITLE
NAME
STREET ADDRESS
CITY OF FLA

TITLE
NAME
STREET ADDRESS
CITY OF FLA

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE ☐ Change ☐ Addition

1. NAME

1. STREET ADDRESS

1. CITY OF FLA

2. TITLE ☐ Change ☐ Addition

2. NAME

2. STREET ADDRESS

2. CITY OF FLA

3. TITLE ☐ Change ☐ Addition

3. NAME

3. STREET ADDRESS

3. CITY OF FLA

4. TITLE ☐ Change ☐ Addition

4. NAME

4. STREET ADDRESS

4. CITY OF FLA

5. TITLE ☐ Change ☐ Addition

5. NAME

5. STREET ADDRESS

5. CITY OF FLA

6. TITLE ☐ Change ☐ Addition

6. NAME

6. STREET ADDRESS

6. CITY OF FLA

14. I hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 199.012(1)(b) Florida Statutes. I further certify that the information indicated on this annual report or supplemented annual report is true and correct 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 make this report as required by Chapter 199 Florida Statutes, and that my name appears in Block 12 of this report or on an attachment with an address.

SIGNATURE:

JUAN CARLOS ORTIZ
SIGNATURE AND TYPE IN PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/1/95
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