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Apr 07 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # P95000016248 (3)

1. Corporation Name
G.M. AROMATICS, INC.

Principal Place of Business
2490 N.W. 32ND STREET
MIAMI FL 33142

Mailing Address
2490 N.W. 32ND STREET
MIAMI FL 33142-5850



2. Principal Place of Business
21 901 Ponce de Leon Blvd.
Suite, Apt. #, etc.
22 606
City & State
23 Coral Gables Florida
Zip Country
24 33134 25 Dade 26 901 Ponce de Leon Blvd.
Suite, Apt. #, etc.
27 606
City & State
28 Coral Gables, Florida
Zip Country
29 33134 30 Dade

3. Date Incorporated or Qualified
02/27/1995
3a. Date of Last Report
05/01/1996
4. FEI Number
65-0565224
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. 199.032,
Florida Statutes ☒ Yes ☐ No

VIERA, EDUARDO
2490 N.W. 32ND STREET
MIAMI FL 33142

10. Name and Address of New Registered Agent
81 Name
Eduardo Garcia
82 Street Address (P.O. Box Number is Not Acceptable)
901 Ponce de Leon Blvd.
83 Suite 606
84 City Coral Gables FL 85 Zip Code 33134

11. Pursuant to the provisions of Sections 607.002 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, of 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 provisions of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title, if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	DELETE
PTD	VIERA, EDUARDO	2490 N.W. 32ND STREET	MIAMI FL 33142	<input type="checkbox"/>
P	CARDOSO, MARIA O	2490 N.W. 32ND STREET	MIAMI FL 33142	<input type="checkbox"/>
S	GUTIERREZ, ENRIQUE	2490 N.W. 32ND STREET	MIAMI FL 33142	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	1.2 NAME	1.3 STREET ADDRESS	1.4 CITY - ST - ZIP	Change	Addition
2.1 TITLE	2.2 NAME	2.3 STREET ADDRESS	2.4 CITY - ST - ZIP	<input type="checkbox"/>	<input type="checkbox"/>
3.1 TITLE	3.2 NAME	3.3 STREET ADDRESS	3.4 CITY - ST - ZIP	<input type="checkbox"/>	<input type="checkbox"/>
4.1 TITLE	4.2 NAME	4.3 STREET ADDRESS	4.4 CITY - ST - ZIP	<input type="checkbox"/>	<input type="checkbox"/>
5.1 TITLE	5.2 NAME	5.3 STREET ADDRESS	5.4 CITY - ST - ZIP	<input type="checkbox"/>	<input type="checkbox"/>
6.1 TITLE	6.2 NAME	6.3 STREET ADDRESS	6.4 CITY - ST - ZIP	<input type="checkbox"/>	<input type="checkbox"/>

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, unchanged, or on an attachment with an address.

SIGNATURE:

SIGNATURE REQUIRED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-28-97

305-446 7773

Date Daytime Phone #

CR2E034 (9/96)