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

**PROFIT** CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P95000087463 1. Corporation Name

BLUE ROSE PERFUMES, INC.

## May 03, 1999 8:00 am Secretary of State

05-03-1999 90044 037 \*\*\*150.00



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Principal Place	e of Business	Mailing Address				. I INTIINTS IIS SEINT MITTER SEIN OPSII ANTIE A	<b>9181 18111 18811 81818</b>	01148 (SIS 100)
134 N.E. 2ND A	AVE.	134 N.E. 2ND AVE	<u>.</u>					
MIAMI FL 33132		MIAMI FL 33132				DO NOT WRITE IN THIS SPACE		
						3. Date Incorporated or Qualifed		
	-					11/13/1995		
2. Principal Pl	lace of Business	2a. Mailing Addre	SS			4. FEI Number	Ap	plied For
21	<u> </u>	26				65-0622986		t Applicable
Suite, Apt.	#, etc.	Suite, Apt. #,	etc.			5. Certificate of Status Desired	\$8.75 / Fee Re	
22	<u> </u>	27						<del></del>
City & State	le	City & State				6. Election Campaign Financing Trust Fund Contribution	\$5.00 Added	
Zip ·	Country	Zip	Zip Country			This corporation owes the current year		101003
24	25	29	30	, ,		Personal Property Tax.	ZYes	□No
27]	9. Name and Address of Curre					10. Name and Address of New Register	red Agent	
				81	Name	,		
	M, BOAZ			82	Street Add	dress (P.O. Box Number is Not Acceptable)		
	NE 2ND AVENUE				0	,	_	
MAN	MI FL 33132			83				ĺ
	•			84	City		85 Zip	Code
						-	of changing its	registered
								registered
office or r	registered agent, or both, in the State	e of Florida. Such chang	ie was authoriz	zed by	the corporat	rporation submits this statement for the purpose tion's board of directors. I hereby accept the ap	pointment as re	gistered * {
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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 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 flustee 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, with all other like empowered.

NAIN X4. 27. 99 X305. 374.4295