## 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 #

P96000014215 (3)

SUN SCENT INC.

CITY-ST-ZIP

STREET ADDRESS

CITY - ST - ZIP

TITLE NAME

TITLE

NAME STREET ADDRESS

			1						
Principal Plac	ce of Business	Mailing Address	3			1 100(100) 110 70(10 00)(11 00)(11 00)		#1414 11841 H	181 8411 1881
601 BRICKELL KEY DRIVE SUITE 200 MIAMI FL 33131		SUITE 200	601 BRICKELL KEY DRIVE SUITE 200 MIAMI FL 33131			DO NOT WRITE IN THIS SPACE			
						3. Date Incorporated or Qualified			
						02/15/1996			
2. Principal I	Place of Business	2a. Mailing Add	ess			4. FEI Number		Ap	plied For
21		26			65-0671224		Not Applicable		
Suite, Apt	t. #, etc.	Suite, Apt. #	, etc.		·	5. Certificate of Status Desired		\$8.75 / Fee Re	
City & Sta	nio	City & State	· · · · · · · · · · · · · · · · · · ·	• • • • • •		6. Election Campaign Financing		\$5.00	May Be
23		28				Trust Fund Contribution		Added 1	
Zip	Country	Zip		Country	/	8. This corporation owes or has pa	aid the curr	ent year Int	angible
24	25	29	30			Personal Property Tax due June			No
	g. Name and Address of Cu	rrent Registered Agent				10. Name and Address of New Re	gistered A	gent	
S	ANCHEZ, JUAN C			81	Name				
601 BRICKELL KEY DRIVE				82	Street Add	ress (P.O. Box Number is Not Acceptate	اهاد		<del> </del>
#200				02	Sileet Add	ress (1.0. box Number la Not Acceptat	,,,,		
MIAMI FL 33131				83	·				
••••	William 1 C 00 10 1			-					
				84	City		FL	<b>85</b> Zip (	Code
office or	registered agent, or both, in the S am familiar with, and accept the of	tate of Florida. Such char oligations of, Section 607	nge was authori .0505, Florida S	ized by Statute	y the corpora s.	poration submits this statement for the p tion's board of directors. I hereby accep	pt the appo	changing it pintment as	s registered registered
- 40	Signature typical or panted macric of tegeth re-				ent signature requ	ired when reinstating)	DATE	DIDECTOR	0.01.40
12.	D CALICARS	AND DIRECTORS		3. 1 TITLE	·	ADDITIONS/CHANGES TO OFFIC	JERS AND	Change	Addition
	•							Onlings	
NAME	IGLESIAS, ENRIQUE	#000		2 NAME					
STREET ADDRESS		#20U			ADDRESS				
CITY-ST-ZIP	MIAMI FL 33131	0i		4 CITY - 9	ST-ZIP			Change	Addition
TITLE		L 171		1 HILE				Cuantie	ויטוויטטא נייין
NAME			-	2 NAME		<i>,</i>			
STREET ADDRESS	1				ADDRESS				
CITY-ST-ZIP				4 CITY -	ST-ZIP			100	0.4200
TITLE		□ 0		1 FITLE				Change	Addition
NAME				2 NAME					
STREET ADDRESS			3.	3 STREET	ADDRESS				
CITY - ST - ZIP				4. CITY-	S1-ZIP			<del></del>	
T+TLE		<b>□</b> Di	ELETE 4.	1 FITLE				Change	Addition
NAME			4.	2 NAME					
PERFECT ARRESTO				a erocci	ADDRECC				

14. Thereby 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 supplies the 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 coeparation for the receiver or use for 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.

1.4 CITY - ST-ZIP

5.4 CITY-ST-ZIP

6.3 STREET ADDRESS

5.1 TITLE

5.2 NAME 5.3 STREET ADDRESS

6.1 TITLE

6.2 NAME

DELFTE

DELETE

20.0-2/60

Change

☐ Change

Addition

Addition

**FILED** 

Apr 01 1998 8:00am

Secretary of State

R2E034 (10/97)