

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P96000014215

1. Entity Name

SUN SCENT INC.

FILED
Jul 31, 2000 8:00 am
Secretary of State

07-31-2000 90008 047 ***558.75

Principal Place of Business

601 BRICKELL KEY DRIVE
SUITE 200
MIAMI FL 33131

Mailing Address

601 BRICKELL KEY DRIVE
SUITE 200
MIAMI FL 33131

2. Principal Place of Business

501 Brickell Key Dr

Suite, Apt. #, etc.

#405

City & State

Miami, FL 33131

Zip
33131

Country

3. Mailing Address

501 Brickell Key Dr.

Suite, Apt. #, etc.

#405

City & State

Miami, FL.

Zip
33131

Country

USA



DO NOT WRITE IN THIS SPACE

4. FEI Number

65-0671224

Applied For

Not Applicable

5. Certificate of Status Desired

☒

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

SANCHEZ, JUAN C
601 BRICKELL KEY DRIVE
#200
MIAMI FL 33131

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

8. 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

(Signature of registered agent and title if applicable.)

(NOTE: Registered Agent signature required when reinstating)

DATE

7/25/00

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

FILE NOW!!! FEE IS \$550.00
After SEPTEMBER 13, 2000 Min. will be \$750.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE
NAME SD
STREET ADDRESS IGLESIAS, ENRIQUE
CITY-ST-ZIP 601 BRICKELL KEY DRIVE #200
MIAMI FL 33131 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

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CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME 501 Brickell Key Dr. ☒ Change ☐ Addition
STREET ADDRESS #405
CITY-ST-ZIP Miami, FL 33131

TITLE
NAME Treasurer ☐ Change ☒ Addition
STREET ADDRESS Juan Carlos Sanchez
CITY-ST-ZIP 501 Brickell Key Dr. #405
MIAMI, FL 33131

TITLE
NAME Secretary ☐ Change ☒ Addition
STREET ADDRESS Andres Restrepo
CITY-ST-ZIP 501 Brickell Key Dr.
MIAMI, FL 33131

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(l), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED SANCHEZ

7/25/00

305-358-3777

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #