

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999.
 AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

FILED
Jul 14, 1999 8:00 am
Secretary of State

07-14-1999 90006 024 ***150.00

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE
 Katherine Harris
 Secretary of State
 DIVISION OF CORPORATIONS

DOCUMENT # P96000065139

1. Corporation Name
 ZODIAC FRAGRANCES INCORPORATED

38/796 - 90006 - 24



Principal Place of Business Mailing Address
 2577 JARDIN DRIVE 2577 JARDIN DRIVE
 WESTON FL 33327 WESTON FL 33327
 US US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 2a. Mailing Address
 Suite, Apt. #, etc. Suite, Apt. #, etc.
 City & State City & State
 Zip Country Zip Country
 25 29 30

3. Date Incorporated or Qualified
 08/05/1996
 4. FEI Number Applied For
 65-0692036 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 owes the current year Intangible Personal Property. Yes No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

BREIER, ROBERT
 2577 JARDIN DR
 WESTON FL 33327

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 607.0502 and 607.1508, 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 607.0505, 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	PSTO	<input type="checkbox"/> DELETE
NAME	BREIER, SANDRA	
STREET ADDRESS	2577 JARDIN DRIVE	
CITY-ST-ZIP	WESTON FL 33327	
TITLE	VD	<input type="checkbox"/> DELETE
NAME	BREIER, ROBERT	
STREET ADDRESS	2577 JARDIN DRIVE	
CITY-ST-ZIP	WESTON FL 33327	
TITLE	V	<input type="checkbox"/> DELETE
NAME	BREIER, RICHARD	
STREET ADDRESS	65 JEFFERSON ST #3	
CITY-ST-ZIP	NEWTON MA	
TITLE	V	<input type="checkbox"/> DELETE
NAME	STAHL, RISA	
STREET ADDRESS	230 23 AVE EAST	
CITY-ST-ZIP	SEATTLE WA 98112	
TITLE	V	<input type="checkbox"/> DELETE
NAME	BREIER, BILL	
STREET ADDRESS	202 DEMOTT AVE	
CITY-ST-ZIP	CLIFTON NJ	
TITLE		<input type="checkbox"/> DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

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

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 trustee 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.

SIGNATURE: *Robert Breier* SIGNATURE REQUIRED: *Robert Breier* 7/7/99 954-349-1519
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (5/99)

587796-90006-24
P96000065139

ZODIAC FRAGRANCES, INC.

2577 JARDIN DRIVE, WESTON, FL 33327
TELEPHONE (954)-349-1519 FAX (954)-349-1485

Division of Corporations
Annual Reports Filings
PO Box 1500
Tallahassee, FL 32302-1500
July 7, 1999

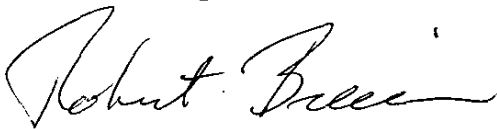
Gentlemen,

I have just received the "2nd notice" request to file my corporation's annual report. The filing fee has been increased from \$150.00 to \$550.00. Since I did not receive my "1st notice" I feel that it is unfair to assess me a penalty. Accordingly, I am enclosing a check in the amount of \$150.00 to cover the initial filing fee.

We are a small company with gross sales of about \$20,000.00 per year and I am the only one who handles the mail. If the 1st mailing was received I would be the person to receive it - and I did not.

Thank you for your assistance in this matter.

Sincerely,
Zodiac Fragrances, Inc.



Robert Breier
Vice-president

