

2005 FOR PROFIT CORPORATION REINSTATEMENT

P3182

FILED
05 NOV 22 PM 1:56
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

10/18/05 01004009 / 150.00



DOCUMENT # P99000000883

1. Entity Name
FRAGRANCE EXPRESS.COM, INC.



Principal Place of Business
6353 W. ROGERS CIR.
BOCA RATON, FL 33487

Mailing Address
5576 WEST SAMPLE ROAD
POMPANO BEACH, FL 33073

2. Principal Place of Business
1239 E Newport Ctr. Drive #114
Deerfield Beach, FL 33442

3. Mailing Address
1239 E Newport Ctr. Drive #114
Deerfield Beach, FL 33442

11092005 REIN-P CR2E098 (6/04)

4. FEI Number
65-0902612

Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
BOLCH-LAURIE-ESQ.
555 S FEDERAL HWY., STE. 400
BOCA RATON, FL 33432

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$750.00
After January 1, 2006, Fee will be \$900.00

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CDVT BARTLETT, ROBERT M 6353 W. ROGERS CIR. BOCA RATON, FL 33487 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	REINSTATEMENT <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSD BARTLETT, MARISIN B 6353 W. ROGERS CIR. BOCA RATON, FL 33487 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	E Roberts NOV 22 2005 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV WELLS, DIANE 6353 W. ROGERS CIR. BOCA RATON, FL 33487 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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12. 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 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 10 or Block 11 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE: Robert M Bartlett **ROBERT BARTLETT** 11/15/05 9848344020
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

FS 282

FRAGRANCE EXPRESS.COM, INC
1239 E. NEWPORT CTR. DR. #114
DEERFIELD BEACH, FL 33442
Phone (954) 834-0420 Fax (954) 834-0421

October 13, 2005

Division of Corporations
PO Box 6327
Tallahassee, FL 32314

Re: Reinstatement #P99000000883
Fragrance Express.Com, Inc.

To Whom It May Concern:

The above referenced corporation did not receive a ~~copy~~ of the 2005 Corporate Report. I understand that the penalty fee will be waived in this instance.

Should you have any questions, please do not hesitate to contact me at 954-834-0420.

Sincerely,



Robert M. Bartlett
President