

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000013668

1. Entity Name  
HISTOIRES DE PARFUMS, INC.

FILED  
May 04, 2000 8:00 am  
Secretary of State  
05-04-2000 90122 015 \*\*\*150.00

Principal Place of Business  
601 BRICKELL KEY DRIVE, SUITE 705  
MIAMI FL 33131

Mailing Address  
601 BRICKELL KEY DRIVE, SUITE 705  
MIAMI FL 33131-2649

2. Principal Place of Business  
Suite, Apt. #, etc.

3. Mailing Address  
Suite, Apt. #, etc.

City & State  
Zip Country

4. FEI Number  
65-0894369

Applied For  
Not Applicable

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



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent  
DA LA PENA, VILLAMUVA & BAJANDAS, LLP  
601 BRICKELL KEY DRIVE, SUITE 705  
MIAMI FL 33131

7. Name and Address of New Registered Agent  
Name  
DE LA PENA & BAJANDAS, LLP.  
Street Address (P.O. Box Number is Not Acceptable)  
601 BRICKELL KEY DRIVE  
SUITE 705  
City MIAMI FL Zip Code 33131

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 LEONCIO E. DE LA PENA 04/28/00  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

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 \$150.00  
After MAY 1, 2000 Fee will be \$550.00  
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		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
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13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: RICARDO BAJANDAS 04/28/00 (305) 377-0809  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/99)