FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT 1998



Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

EXOTIC COLLECTORS LTD, INC.

FILED May 04 1998 8:00am Secretary of State

	· · · · · · · · · · · · · · · · · · ·			<u></u>							
Pr	incipal Place of Busines	38	Mailing Addre	Mailing Address 9470 158 ROAD S. DELRAY BEACH FL 33446 US			i saara) arter tõtet triitt itilite resek titt äibit allet etett atett atett atett atett läiki				
C	M70 158 ROAD S. DELRAY BEACH FL 33446 JS		DELRAY BEA				DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 08/07/1978				
2.	Principal Place of Busi	ness	2a. Mailing Ad	2a. Mailing Address			4. FEI Number Applied For				
21			26	26			59-1811583 Not Applicab	le			
22	Suite, Apt. #, etc.		Suite, Apt	Suite, Apt. #, etc.			5. Certificate of Status Desired See Required Fee Required	-			
23	City & State		City & Sta	1e			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees				
24		Country 25	Zip 29	30	ountry		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes 🔀 No				
Name and Address of Current Registered Agent							10. Name and Address of New Registered Agent	_			
	MERCADO, JI				81	Name					
9470 158 ROAD S. DELRAY BEACH, FL					82	Street Add	dress (P.O. Box Number is Not Acceptable)				
	33446	511, 12			83			_			
					84	City	FL 85 Zip Code	_			
11	office or registered as	gent, or both, in the S	0502 and 607 1508, Flitate of Florida, Such chibinations of Section 6	nange was authorizi	ed by	the corpora	proration submits this statement for the purpose of changing its registere ation's board of directors. I hereby accept the appointment as registered	<u>T</u>			

SIGNATURE	Signature, typed or printed came of registered agent and	lite it sopleable (NOTE	Registered Agent signature requi	rad when reinstation)	DATE	
12.	OFFICERS AND DIR		13.	ADDITIONS/CHANGES TO O		S IN 12
TITLE	PD	DELETE	1.1 TITLE		∠ Change	Addition
NAME	MERCADO, JUAN		1.2 NAME			
STREET ADORESS	7420 ANNAPOLIS LANE		1.3 STREET ADDRESS			
CITY-ST-ZIP	PARKLAND, FL 00000		1.4 CITY-ST-ZIP		ZI p 33	067
TITLE	SD	DELETÉ	2.1 TITLE		Change	Addition
HAME	MERCADO, PATRICA		2.2 NAME			
STREET ADDRESS	7420 ANNAPOLIS LANE		2 3 STREET ADDRESS			
CITY-ST-ZIP	PARKLAND, FL 00000		2. 4 CITY-ST-ZIP		ZI p 330	67
TITLE		☐ DELETE	3.1 TITLE		Change	Addition
NAME			3.2 NAME			
STREET ADDRESS			3.3 STREET ADDRESS			
CITY-S1-ZIP			3.4. CITY - ST - ZIP			
TITLE		DELETE	4.1 TITLE		Change	Addition
NAME			4. 2 NAME			
STREET ADDRESS			4.3 STREET ADDRESS			
CITY-ST-ZIP			4.4 CITY-ST-ZIP			
TITLE		DELETE	5.1 TITLE		Change	Addition
NAME			5.2 NAME			
STREET ADDRESS			5.3 STREET ADDRESS			
CITY-ST-ZIP			5.4 CITY - ST - ZIP			
TITLE		☐ DELETE	6.1 TITLE		Change	Addition
NAME			62 NAME			
STREET ADDRESS			63 STREET ADDRESS			

64 CITY-ST-ZIP

14. 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 supplimental 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.