FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT **1995**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED

95 MAY 16 AM 8:15

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **H17390** **(6)**

1. Corporation Name

ESOTERIC PROPERTIES, INC.

Principal Place of Business	Mailing Address
8670 NW 6TH LANE APT 103 MIAMI FL 33126 US	C/O GUILLERMO GENER 8670 NW 6TH LANE APT 103 MIAMI FL 33126 US (See new address in Block 10

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 08/21/1984
3a. Date of Last Report: 04/20/1994

2. Principal Place of Business
21: 5545 Pine Tree Drive
Suite, Apt. #, etc. 22: N/A
City & State 23: Miami Beach,Fla.33140
Zip 24: Country 25:

2a. Mailing Address
26: P.O.Box 43-2281
Suite, Apt. #, etc. 27: N/A
City & State 28: Miami Beach,Fla.33140
Zip 29: Country 30:

4. FEI Number: 59-2635317 ☐ Applied For ☐ 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 has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

GENER, GUILLERMO
8670 N.W. 6TH LANE, APT. #103
MIAMI FL 33126

10. Name and Address of New Registered Agent

81 Name: Guillermo Gener
82 Street Address (P.O. Box Number is Not Acceptable): 8330 SW 81 Lane
83: (P.O.Box 43-2281,Miami,Fla.33243-2281)
84 City: Miami FL 85 Zip Code: 33143

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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when amending)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PT	11 TITLE	☐ Change ☐ Addition
NAME	ZANARDI, OLIMPIA	12 NAME	
STREET ADDRESS	5545 PINETREE DR.	13 STREET ADDRESS	
CITY ST ZIP	MIAMI BCH., LF	14 CITY ST ZIP	
TITLE	VS	21 TITLE	Same ☒ Change ☐ Addition
NAME	GENER, GUILLERMO	22 NAME	Same
STREET ADDRESS	8670 NW 6TH LANE #103	23 STREET ADDRESS	8330 SW 81 Lane,Miami,Fla.33143
CITY ST ZIP	MIAMI FL	24 CITY ST ZIP	(P.O.Box 43-2281,Miami,Fla.33243-2281
TITLE		31 TITLE	☐ Change ☐ Addition
NAME		32 NAME	
STREET ADDRESS		33 STREET ADDRESS	
CITY ST ZIP		34 CITY ST ZIP	
TITLE		41 TITLE	☐ Change ☐ Addition
NAME		42 NAME	
STREET ADDRESS		43 STREET ADDRESS	
CITY ST ZIP		44 CITY ST ZIP	
TITLE		51 TITLE	☐ Change ☐ Addition
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	
CITY ST ZIP		54 CITY ST ZIP	
TITLE		61 TITLE	☐ Change ☐ Addition
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY ST ZIP		64 CITY ST ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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 above, or on an attachment with an address.

SIGNATURE: Gener VS — Guillermo Gener VS — May 13,1995 — (305) 275-8238
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Telephone Number

0124121 CR