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

SIGNATURE:

May 01 1998 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION ANNUAL REPORT Secretary of Stat Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # (6)L50466 **EXECUTIVE AQUARIUM LEASING, INC.** 1 | 1.4.1 | 1.0 | 1.0 | 1.0 | 1.0 | 1.0 | 1.0 | 1.0 | 1.0 | 1.0 | 1.0 | 1.0 | 1.0 | 1.0 | 1.0 | 1.0 | 1.0 | 1.0 Principal Place of Business Mailing Address 13250 S.W. 87TH AVE. 13250 S.W. 87TH AVE. MIAMI FL 33176 MIAMI FL 33176 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 02/16/1990 2. Principal Place of Business 2a. Mailing Address Applied For 21 65-0203171 Not Applicable 26 Suite, Apt. #, etc. Suite, Apt. #, etc \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees 28 Žiρ Zip Country Country This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes □ No 24 30 20 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent RUIZ, RICARDO L 8181 S.W. 168 ST. Street Address (P.O. Box Number is Not Acceptable) **MIAMI FL 33157** 83 City 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 requ ed when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE Change Addition TITLE 1.1 TITLE NAME RUIZ, RICARDO L 1.2 NAME CR2E034 8181 S.W. 168 ST. STREET ADDRESS 1.3 STREET ADDRESS **MIAMI FL 33157** CITY-ST-ZIP 1.4 CITY - ST - ZIP DELETE Change Addition TITLE 2.1 TITLE NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE NAME 3.2 NAME 3.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP Change Addition TITLE DELETE 4.1 TITLE NAME 4. 2 NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 City-St-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 5.1 TITLE NAME 5.2 NAME 5.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP TITLE DELETE 6.1 TITLE Change Addition NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP 14. I hereby certify that the information supplied with this tilipe 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 in 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 freely made and the report as required by Chapter 607, Florida Statutes; and that my name appears in Block 13 if changed, or or an attackment an address. 4/23/98 305-2541900

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