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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # M35275

(0)

GENJE EXOTICS, INC.

FILED May 18 1998 8:00am Secretary of State



Principal Place of Business Mailing Address					T (BELDETE SOR TITAL BISKA LIETT 1800) Erts Diate alder Alder atber erber febr
C/O JOHN C. SEIPP JR. 1 SE 3RD AVE. 2400 AMERIFIRST BLDG MIAMI FL 33131		C/O JOHN C. SEIPP JR. 1 SE 3RD AVE, 2400 AMERIFIRST BLDG MIAMI FL 33131		LDG	DO NOT WRITE IN THIS SPACE
					3. Date Incorporated or Qualified
2 Principal Pla	ace of Business	2a. Mailing Address			07/16/1986 4. FEI Number Applied For
21	5. Districted	26			59-2726383 Not Applicable
Suite, Apt	W, etc.	Suite, Apt. #, etc.			\$9.7E Additional
22		27			5. Certificate of Status Desired Fee Required
City & State)	City & State			6. Election Campaign Financing \$5.00 May Be
23		28			Trust Fund Contribution Added to Fees
Zip	Country	Zφ	Coun	try	8. This corporation owes or has paid the current year Intangible
24	25		30		Personal Property Tax due June 30. Yes No
	9. Name and Address of Current	Registered Agent		M Maria	10. Name and Address of New Registered Agent
	PP, JOHN C., JR.			Name	
	O AMERIFIRST BLDG		6	2 Street	t Address (P.O. Box Number is Not Acceptable)
	E SE THIRD AVE		-	3	
MIA	MI FL 33131		,	"	
			E	City	FL 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 lamiliar with, and accept the obligations of, Section 607.0505, Florida Statutes.					
SIGNATURE Signature, typind or printed hance of registered agent and tilk if applicable (NOTE: Registered Agent signature required when reinstating) DATE					
12,	Signature, typed or printed name of registered agent OFFICERS AND	·	Hogistered /	Ngon: signaturi	re required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	DST	DÉLETE	1.1 TITL	 F	Change Addition
NAME	BITZ, D. MICHAEL	_	1.2 NAM		
STREET ADDRESS	8905 SW 87TH AVE, S-212			EET ADDRESS	,
CITY-ST-ZIP	MIAMI FL			'- ST- ZIP	
TITLE	DP	☐ DELETE	2.1 TITL		Change Addition
NAME	BITZ, JEAN SEIPP		2.2 NAM	1E	
STREET ADDRESS	8905 SW 87TH AVE, S-212		2.3 STR	EET ADDRESS	
CITY-ST-ZIP	MIAMI FL		2. 4 CIT	Y-ST-ZIP	
TITLE			3.1 TITL	E	Change Addition
NAME			3.2 NAM	IE	
STREET ADDRESS			3.3 STR	EET ADDRESS	;
CITY-ST-ZIP			3.4. CIT	Y - ST - ZIP	
TITLE		☐ DELETE	4.1 TITL	ŧ	☐ Change ☐ Addition
NAME 🛔			4. 2 NAI	NE	
STREET_ JURESS			4.3 STR	EET ADDRESS	5
CITY - ST - ZIP			4.4 CITY	-ST-ZIP	
TITLE "		☐ DELETE	5.1 TITL	E	Change Addition
NAME			5.2 NAM		
STREET ADDRESS			5.3 STR	EET ADDRESS	
CITY - ST - ZIP		D British	-	r-S1-ZIP	
TITLE		DELETE	6.1 TITL		Change Change Addition
NAME			6.2 NAM		
STREET ADDRESS				EET ADDRESS	5
CITY-ST-ZIP	orthy that the information number	this filing done not evalle for		-ST-ZIP	stert in Section 119 07/3Vi). Florida Statutes, I further certify that the information

4. 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 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 equired 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.

Por role 19x 18x5) 25-545