

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Jul 02, 2002 8:00 am
Secretary of State

05-01-2002 91611 001 ***158.75

DOCUMENT # MT3663
1. Entity Name EXOTICA ACADEMY INC

DO NOT WRITE IN THIS SPACE

96261

2. Principal Place of Business <u>6229 MIRAMAR</u> Suite, Apt. #, etc. <u>PARKWAY</u> City & State <u>MIRAMAR FLA</u> Zip <u>33023</u> Country <u>BROWARD</u>		3. Mailing Address <u>6229 MIRAMAR</u> Suite, Apt. #, etc. <u>PARKWAY</u> City & State <u>MIRAMAR FLA</u> Zip <u>33023</u> Country <u>BROWARD</u>	
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4. FEI Number <u>65-0052820</u>	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	

7. Name and Address of Current Registered Agent Name <u>SANDRA MCCREA</u> Street Address (P.O. Box Number is Not Acceptable) <u>6828 S.W. 37 ST</u> City <u>MIRAMAR</u> FL Zip <u>33023</u>	
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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 Sandra McCreas Pres DATE 4/18/02
(Signature typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reappointing))

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. ☒
(See criteria on back)

January 1 - May 1 Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$61.25
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

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<u>PRES & Directors</u> <u>SANDRA MCCREA</u> <u>6828 S.W. 37 ST</u> <u>MIRAMAR FLA 33023</u>
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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)(f), 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 on an attachment with an address, with all other like empowered.

SIGNATURE: Sandra McCreas DATE 4/18/02 (951) 981-2576
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034B (12/01)