

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000038369

FILED
Jan 24, 2005
Secretary of State

Entity Name: EXQUISITE PROPERTIES INC.

Current Principal Place of Business:

21175 LA VISTA CIR.
BOCA RATON, FL 33428

New Principal Place of Business:

1081 NW 13 ST
SUITE #2
BOCA RATON, FL 33486

Current Mailing Address:

21175 LA VISTA CIR.
BOCA RATON, FL 33428

New Mailing Address:

FEI Number: 65-1115568 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

EFLANLI, MEHMET I
21175 LA VISTA CIR.
BOCA RATON, FL 33428 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: EFLANLI, MEHMET I
Address: 21175 LA VISTA CIR.
City-St-Zip: BOCA RATON, FL 33428

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VP () Change (X) Addition
Name: EFLANLI, GONUL B
Address: 21175 LA VISTA CIR
City-St-Zip: BOCA RATON, FL 33428

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MEHMET ILKER EFLANLI

P

01/24/2005

Electronic Signature of Signing Officer or Director

_____ Date