


FILED  
May 05, 2003 8:00 am  
Secretary of State

05-05-2003 91769 002 \*\*\*150.00

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

DOCUMENT # *PO1000102382*

1. Entry Name  
*Exotic Aquatic, Inc.*



**DO NOT WRITE IN THIS SPACE**

2. Principal Place of Business  
*1170 NE 34ct*

3. Mailing Address  
*1170 NE 34ct*

DO NOT WRITE IN THIS SPACE

City & State  
*Oakland Park, FL*

City & State  
*Oakland Park, FL*

Zip  
*33334*

Country  
*Broward*

Zip  
*33334*

Country  
*Broward*

4. FEI Number  
*65-1145909*

Applied For  
 Not Applicable

5. Certificate of Status Desired  **\$8.75 Additional Fee Required**

*See other page*  
**DO NOT WRITE IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name  
*Rudolf & Hoffman P.A.*

Street Address (P.O. Box Number is Not Acceptable)  
*615 NE 3rd Ave*

City  
*Fort Lauderdale*

FL Zip Code  
*33304*

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

9. Election Campaign Financing Trust Fund Contribution.  **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP <i>President Homer Robert L II 1707 NE 19 ST Fort Lauderdale, FL 33305</i>	TITLE NAME STREET ADDRESS CITY-ST-ZIP <i>check was not included with previous Report</i>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TITLE NAME STREET ADDRESS CITY-ST-ZIP <b>DO NOT WRITE IN THIS SPACE</b>
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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(X), 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 10 or on an attachment with an address, with all other like empowered.

SIGNATURE: *Robert L Homer II* DATE: *4/28/03*

2021) BP0322CR