


**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
5/4 Jun 15, 2005 8:00 am
Secretary of State

05-04-2005 90155 020 ***150.00

DOCUMENT # P02000021553 1. Entity Name EXOTIC BITES, INC.	
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Principal Place of Business 1842 SOUTH YOUNG CIR HOLLYWOOD, FL 33020 <i>1842</i>	Mailing Address 1940 MADISON STREET APT #4 HOLLYWOOD, FL 33020
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66022964



DO NOT WRITE IN THIS SPACE

04302005 No Chg-P CR2E034 (10/03)

4. FEI Number 65-0742068	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent FLORES, MARIA 1940 MADISON STREET APT #4 HOLLYWOOD, FL 33020
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**DO NOT WRITE
IN THIS SPACE**

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 *Maria Flores* (NOTE: Registered Agent signature required when reinstating) *11-29-05* DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00**

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	PD FLORES, MARIA 1940 MADISON STREET APT #4 HOLLYWOOD, FL 33020
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IN THIS SPACE**

12. 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 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 Block 11 if changed, or on an attachment with an address, with all other like employees.

SIGNATURE: *Maria Flores*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

11-29-05 *754 204 7073*
Date Daytime Phone