

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000124277

Entity Name: EXOTIC HERPS 28 INC.

FILED
May 15, 2005
Secretary of State

Current Principal Place of Business:

143 LONDON FOG WAY
SANFORD, FL 32771 US

New Principal Place of Business:

Current Mailing Address:

143 LONDON FOG WAY
SANFORD, FL 32771 US

New Mailing Address:

FEI Number: 20-1592554

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DOOLEY, PATRICIA
143 LONDON FOG WAY
SANFORD, FL 32771 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: ALEXANDER DOOLEY, ENOC
Address: 143 LONDON FOG WAY
City-St-Zip: SANFORD, FL 32771 US

Title: VP () Delete
Name: DOOLEY, PATRICIA
Address: 143 LONDON FOG WAY
City-St-Zip: SANFORD, FL 32771 US

Title: SEC () Delete
Name: SCALA, KIMBERLY
Address: 143 LONDON FOG WAY
City-St-Zip: SANFORD, FL 32771 US

Title: TRE () Delete
Name: ALEXANDER DOOLEY, ENOC
Address: 143 LONDON FOG WAY
City-St-Zip: SANFORD, FL 32771 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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: PATRICIA M. DOOLEY

VP

05/15/2005

Electronic Signature of Signing Officer or Director

_____ Date