

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

FILED
Apr 14 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		 FLORIDA DEPARTMENT OF STATE Sandra B. Northam Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # P930000643191 1. Corporation Name Explorations Entertainment Group, Inc			
Principal Place of Business 902 Clintmore Road #136 Boca Raton, FL 33487		Mailing Address Same	
2. Principal Place of Business 902 Clintmore Road Suite, Apt. #, etc. 136 City & State Boca Raton, FL Zip 33487 Country USA		2a. Mailing Address Same Suite, Apt. #, etc. City & State Zip Country	
3. Date Incorporated or Qualified June 14 1993		3a. Date of Last Report April 96	
4. FEI Number 59-3191053		Applied For Not Applicable	
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution ☐		\$5.00 May Be Added to Fees	
7. This corporation has liability for intangible tax under s. 199.032 Florida Statutes ☐ Yes ☒ No			
8. Name and Address of Current Registered Agent ?		10. Name and Address of New Registered Agent 81 Name Michelle Tucker 82 Street Address (P.O. Box Number is Not Acceptable) 902 Clintmore Road 83 #136 84 City Boca Raton FL 85 Zip Code 33487	
11. Pursuant to the provisions of Sections 607.0602 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE <i>Michelle Tucker</i> Signature of person named as registered agent and fee is not due			
12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE President NAME Michelle Tucker STREET ADDRESS 902 Clintmore Road #136 CITY-ST-ZIP Boca Raton, FL 33487		11 TITLE 12 NAME 13 STREET ADDRESS 14 CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		21 TITLE 22 NAME 23 STREET ADDRESS 24 CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		31 TITLE 32 NAME 33 STREET ADDRESS 34 CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		41 TITLE 42 NAME 43 STREET ADDRESS 44 CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		51 TITLE 52 NAME 53 STREET ADDRESS 54 CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		61 TITLE 62 NAME 63 STREET ADDRESS 64 CITY-ST-ZIP	
14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 118.07(3)(c), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath. 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 12 or Block 13 if changed, or on an attachment with an address.		7000002144327 -04/16/97--01002--035 ***165.00	
SIGNATURE: <i>Michelle Tucker</i> - Pres. SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Michelle Tucker - Pres.		4/8/97 (56) 998-3435	