

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT 1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIRECTOR OF CORPORATION

b 5758

DOCUMENT # P93000073427 (5)

1. Corporation Name

EXOTICA INTERNATIONAL, INC.



Principal Place of Business: C/O CLAIRE'S MARINE OUTFITTERS, 2921 SW 2ND AVE, LAUDERDALE FL 33315
Mailing Address: C/O CLAIRE'S MARINE OUTFITTERS, 2921 SW 2ND AVE, FT LAUDERDALE FL 33315, US

3. Date incorporated or Qualified: 10/22/1993
3a. Date of Last Report: 06/30/1995
4. FEI Number: 65-0444821
5. Certificate of Status Desired: \$8.75 Additional Fee Required
6. Election Campaign Financing: \$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes: Yes No

21. Principal Place of Business: 3105 S. MAIN STREET, HIGH SPRINGS, FL 32643, USA
26. Mailing Address: % ACCOUNTING BUSINESS CONSULTANTS, 790 E. BROWARD BLVD # 302, FT. LAUDERDALE, FL 33301-2077, USA

9. Name and Address of Current Registered Agent: GREENWALD, TEDD S, C/O CLAIRE'S MARINE OUTFITTERS, 2304 S MIAMI RD, FT LAUDERDALE FL 33316

10. Name and Address of New Registered Agent: TEDD S. GREENWALD, % THE GREAT OUTDOORS INN, 3105 S. MAIN STREET, HIGH SPRINGS, FL 32643

11. Pursuant to the provisions of Sections 607.0502 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: TEDD S. GREENWALD, PRESIDENT

Tedd Greenwald 5-1-96

12. OFFICERS AND DIRECTORS		
TITLE	D GREENWALD, TEDD S	<input type="checkbox"/> DELETE
NAME	2921 SW 2ND AVE	
STREET ADDRESS	FT LAUDERDALE FL	
CITY-ST-ZIP		
TITLE	D FLOWERS, MARY E	<input type="checkbox"/> DELETE
NAME	2921 SW 2ND AVE	
STREET ADDRESS	FT LAUDERDALE FL	
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
1.1 TITLE	D TEDD S. GREENWALD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	3105 S. MAIN STREET	
1.3 STREET ADDRESS	HIGH SPRINGS, FL	
1.4 CITY-ST-ZIP		
2.1 TITLE	D MARY ELLEN FLOWERS	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	3105 S. MAIN STREET	
2.3 STREET ADDRESS	HIGH SPRINGS, FL 32643	
2.4 CITY-ST-ZIP		
3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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; 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Tedd Greenwald

5-1-96

904-484-423

CR2E034 (12/95)