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

PROFIT **CORPORATION** ANNUAL REPORT

1998



Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P94

1. Corporation Name
EXOTIC PET IMPORTS, INC. P94000064185 (9)

FILED Feb 05 1998 8:00am Secretary of State

Principal Place of Business Mailing Address						
25225 SW 152ND AVE. 25225 SW 152ND AVE.						
HOMESTEAD FL 33032 HOMESTEAD FL 33032				:		
				DO NOT WRITE IN THIS SPACE		
				3. Date incorporated or Qualified 08/29/1994		
2. Principal P	face of Business	2a. Mailing Address		4. FEI Number	Applied For	
21 26		⊢ , •		65-0520767	Applied For Not Applicable	
		Suite, Apt. #, etc.		eo ·	75 Additional	
22		27		1.5. Lettificate of Status Desired 1.1	e Required	
City & State City & State		City & State		6. Election Campaign Financing - \$5	.00 May Be	
23 28		28			ded to Fees	
Zip	Country	Zip	Country	8. This corporation owes or has paid the current year	ar Intangible	
24	25		30	Personal Property Tax due June 30. Yeş	No	
9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent						
SCHMALBACH, ANTONIO E						
25225 SW 152ND AVE.			82 Street Addr	ress (P.O. Box Number is Not Acceptable)		
l HC	DMESTEAD FL 33032		83			
	1		[83]			
	k		84 City	FL 85	Zip Code	
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, it 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 & June 19 6 7 . 30 . 9 8						
SIGNATURE	Signature, typed or printed name of the istered agen	t and title if applicable. (NOTE:	Registered Agent signature requir	red when reinstating) DATE	 	
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS AND DIREC	TORS IN 12	
TITLE	D	DELETE	1.1 TITLE	☐ Cha	nge 🔲 Addition	
NAME	SCHMALBACH, ANTONIO E		1.2 NAME			
STREET ADDRESS	25225 SW 152ND AVE.		1.3 STREET ADDRESS			
CITY-ST-ZIP	HOMESTEAD FL 33032		1.4 CITY-ST-ZIP			
TITLE	D DADDON DODEDT	☐ DELETE	2.1 TITLE	<u></u> Cha	nge L Addition	
NAME	PADRON, ROBERT		2.2 NAME			
STREET ADDRESS	25225 SW 152ND AVE. HOMESTEAD FL 33032		2.3 STREET ADDRESS	*		
CITY-ST-ZIP	HOMESTEAD FL 33032	☐ DELETE	2.4 CITY-ST-ZIP			
TITLE		□ OELETE	3.1 TITLE	Chai	nge 📙 Addition	
NAME CYPECT ADODESE			3.2 NAME			
STREET ADDRESS			3.3 STREET ADDRESS			
CITY-ST-ZIP		DELETE	3.4. CITY-ST-ZIP 4.1 TITLE	Char	nge	
NAME			4. 2 NAME	in one	Addition	
STREET ADDRESS			4.3 STREET ADDRESS			
CITY-ST-ZIP						
TITLE		☐ DELETE	4.4 CITY-ST-ZIP 5.1 TITLE	☐ Chai	nge Addition	
NAME			5.2 NAME	Und	1 videncia,	
STREET ADDRESS			5.3 STREET ADDRESS			
CITY-ST-ZIP			5.4 CITY-ST-ZIP			
TITLE		DELETE	6.1 TITLE	Char	nge	
NAME			6.2 NAME			
STREET ADDRESS			6.3 STREET ADDRESS			
CITY-ST-ZIP			6.4 CITY-ST-ZIP			
	ertify that the information supplied with	n this filling does not qualify for		Section 119.07(3)(i), Florida Statutes. I further certify that	t the information	

emental 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 us receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in

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