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May 05 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P94000085292 (8)

1. Corporation Name
EXOTIC DECOR, INC.

Principal Place of Business

106 COMMERCE STREET
STE. 102 SILVER LAKE TRADE CENTRE
LAKE MARY FL 32746

Mailing Address

106 COMMERCE STREET
STE. 102 SILVER LAKE TRADE CENTRE
LAKE MARY FL 32746-6217



2. Principal Place of Business

21 1255 BELLE AVENUE

Suite, Apt. #, etc.

22 SUITE # 157

City & State

23 WINTER SPRINGS, FLORIDA.

Zip

24 32708.

Country

25 U.S.A.

2a. Mailing Address

26 P.O. Box : 2444

Suite, Apt. #, etc.

27

City & State

28 WINTER PARK, FLORIDA.

Zip

29 32790-2444

Country

30 U.S.A.

3. Date Incorporated or Qualified

11/18/1994

3a. Date of Last Report

03/29/1996

4. FEI Number

59-3294530

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

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

☐

Yes

☐

No

9. Name and Address of Current Registered Agent

KASSOO, AHMED Y
10538 SAILAWAY LANE
ORLANDO FL 32825

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

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, 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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE P ☐ DELETE

NAME KARIM QADRI, SYED A
STREET ADDRESS 409 SUN LAKE CIR. # 213
CITY-ST-ZIP LAKE MARY FL 32746

TITLE D ☐ DELETE

NAME MAYET, TARIQ Y
STREET ADDRESS 10538 SAILAWAY LANE
CITY-ST-ZIP ORLANDO FL 32825

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ 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 does not qualify for the exemption stated in Section 119.07(3)(i), 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: *(Signature)* (Syed A. K. Qadri)

401.28.97.

(407) 696-2226

CR2E034 (9/96)