

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  
DIVISION OF CORPORATIONS

DOCUMENT # P95000051700 (9)

1. Corporation Name

FLORIDA REPTILES CORP.



Principal Place of Business

Mailing Address

15358 S.W. 72ND ST.  
SUITE 24  
MIAMI FL 33193

15358 S.W. 72ND ST.  
SUITE 24  
MIAMI FL 33193

3. Date Incorporated or Qualified

3a. Date of Last Report

07/03/1995

2. Principal Place of Business

2a. Mailing Address

21 13039 S.W. 133 COURT  
Suite, Apt. #, etc.

26 13039 S.W. 133 COURT  
Suite, Apt. #, etc.

4. FEI Number

Applied For

65-0594213

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

10. Name and Address of New Registered Agent

CHIRIM, CARLOS E  
15358 S.W. 72ND ST.  
SUITE 24  
MIAMI FL 33193

Florida Reptiles  
13039 S.W. 133 Court  
Miami, FL 33186

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 of registered agent and fee (if applicable)

(NOTE: Registered Agent signature required when reinstating)

1-25-96

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE ☐ DELETE  
NAME CHIRIM, CARLOS E  
STREET ADDRESS % 15358 S.W. 72ND ST. SUITE 24  
CITY - ST - ZIP MIAMI FL 33193

1.1 TITLE ☐ Change ☐ Addition

2. TITLE ☐ DELETE  
NAME PACHONI, JESUSS E  
STREET ADDRESS % 15358 S.W. 72ND ST. SUITE 24  
CITY - ST - ZIP MIAMI FL 33193

1.2 NAME

3. TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

1.3 STREET ADDRESS

4. TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

1.4 CITY - ST - ZIP

5. TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

2.1 TITLE ☐ Change ☐ Addition

6. TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

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 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-25-96 (305) 234-9361

CR2E034 (12/95)