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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000076125 (0)

EXOTIC ENTERPRISES, INC.

Principal Place of Business Mailing Address 600 SW 72 COURT 600 SW 72 COURT MIAMI FL 33144 MIAMI FL 33144-2737 3. Date Incorporated or Qualified 3a. Date of Last Report 09/26/1995 07/19/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 65-0630934 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution 28 Added to Fees $Z_{\rm ID}$ Country Zip Country 8. This corporation has liability for intengible tax under s. 199.032, Florida Statutes Yes No 24 25 29 30 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent GARCIA, EDDY JR **600 SW 72 COURT B2** Street Address (P.O. Box Number is Not Acceptable) **MIAMI FL 33144** 83 **B4** City 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, typical or printed name of registered agent and lide if applicable (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (96/6)12. 13. TITLE DELETE 1.1 TITLE Change ☐ Addition GARCIA, EDDY JR. 1.2 NAME NAME 3R2E034 600 SW 72 COURT STREET ADDRESS 1.3 STREET ADDRESS **MIAMI FL 33144** CITY - ST - ZIP 1.4 CITY-ST-ZIP DELETE Change Addition TITLE 2.1 TITLE 2.2 NAME NAME STREET ADDRESS 2.3 STREET ADDRESS 2. 4 CITY-ST-ZIP C(1Y - 51 - 2)P DELETE ☐ Change Addition TITLE 3.1 TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS CITY - S1 - ZiP 3.4. CITY-ST-ZIP DELETE Change Addition 4.1 TITLE THILE NAME 4 2 NAME 4.3 STREET ADDRESS STREET ADORESS 4.4 CITY - ST - ZIP CHY-ST-Z01 DELETE Change Addition 5.1 TITLE THLE NAMÉ 5.2 NAME

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.

6.4 CITY-ST-ZIP

5.3 STREET ADDRESS

63 STREET ADDRESS

5.4 CITY - ST- ZIP

6.1 TITLE

6.2 NAME

SIGNATURE:

STREET ADDRESS City - St - Zie

STHEET ACCORESS CHY-ST-ZIP

THEE

NAMI

IGNATURE AND TYPED ON PRINTED NAME OF SIGNING OFFICER ON DIRECTOR

DELETE

Daylime Phone

FILED

May 02 1997 8:00am

Secretary of State

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Addition