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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9600005773 (2)

EXCLUSIVELY BABIES, INC.

FILED Apr 15 1998 8:00am Secretary of State



Principal Place of Business		Mailing Address			T GODINDON IND NOME ONLY ORAN OBJAN BOAR OBJAN ONLY INDIAN	
14705 BALGO	OWAN ROAD. #201	14705 BALGOWAN ROAD.	#201		İ	
MIAMI LAKES FL 33016		MIAMI LAKES FL 33016			DO NOT MIDITE IN THIS SPACE	
					DO NOT WRITE IN THIS SPACE 3. Date incorporated or Qualified	
					,	
2. Principal P	Place of Business	20. Mailing Address			01/17/1996 4. FEI Number Applied For	
21 9115	SW 108 Circle Ct	· = 9115 (1.1 11)5	BCire	le (4. FEI Number Applied For Not Applied For Not Applied For	
Suite, Apt. #, etc. Suite, Apt. #, etc.			<u> </u>		CR 75 Additional	
27				•	5. Certificate of Status Desired Fee Required	
City & State City & State				•,	Election Campaign Financing \$5,00 May Be	
23 Mianu, the 28 Mianu, the					Trust Fund Contribution Added to Fees	
Zip Country Zip Cou					8. This corporation owes or has paid the current year Intangible	
24 33176 25 29 33 16 30					Personal Property Tax due June 30. Yes No	
9. Name and Address of Current Registered Agent 1					10. Name and Address of New Registered Agent	
ESSEN, RICHARD J				Name	3	
18305 BISCAYNE BLVD.			62	82 Street Address (P.O. Box Number is Not Acceptable)		
	JITE 400			on on the state of		
	ORTH MIAMI BEACH FL 33160		83			
			84	City	85 Zip Code	
				1	FL	
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		13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	☐ DELETE	1.1 TITLE		Change Addition	
NAME	ENDARA, ELENA	1	1.2 NAME			
STREET ADDRESS	14705 BALGOWAN RD., #201	1	1.3 STREET	ADDRESS	9115 SW 108 Circle Ct. Miami, FL 33176	
CATY-ST-ZIP	MIAMI LAKES FL		1.4 CITY-5		Miami. Fl. 33176	
TITLE	D	DELETE	2.1 TITLE		Change Addition	
NAME	RIVERA, JODELE		2.2 NAME			
STREET ADDRESS	14203 SW 66 ST. #B-105	•	2.3 STREET	ADDRESS		
CITY-ST-ZIP	MIAMI FL 33183		2. 4 CITY-ST-ZIP			
TITLE		☐ DELETE	3.1 TITLE		☐ Change ☐ Addition	
NAME			3.2 NAME			
STREET ADDRESS			3.3 STREET	ADDRESS		
CITY-ST-ZIP			3.4. CITY-			
TITLE			4.1 TITLE	***	Change Addition	
NAME			4. 2 NAME			
STREET ADDRESS			4.3 STREET	ADDRESS		
CITY-ST-ZIP			4.4 CITY - 9			
TITLE		DELETE	5.1 TITLE	•	Change Addition	
NAME			5.2 NAME			
STREET ADDRESS			5.3 STREET	ADDRESS		
CITY-ST-ZIP			5.4 CITY - 9			
TITLE		DELETE	6.1 TITLE		Change Addition	
NAME			6.2 NAME			
STREET ADDRESS			6.3 STREET	ADDRESS	.†	
CITY-ST-ZIP			6.4 CITY - S			
14. I hereby c	ertify that the information supplied with	h this filing does not qualify for t	he exemp	tion state	ted 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 601, Florida Statutes; and that my name appears in						
Block 12 or Block 13 if chal@ed_or on an attachment with an address.						
010:	(Vana	Landland			9/10/90 305-275-11	
SIGNAT	URE: \		_		(101/11)	