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

Mailing Address

SUITE 201

BOI N. MAGNOLIA AVENUE

ORLANDO FL 32803-3842

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business

801 N. MAGNOLIA AVENUE

ORLANDO FL 32803

SUITE 201



appears in Block 12 or Block 13 if changed, or on an attachment with an address.

FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000095743 (6)

EXOTIC AND FINE COLLECTIBLES, INC.

2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For Post Office Box 952945 Post Office Box 952945 59-3415688 Not Applicable Suite Apt. #. etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required 27 City & State Lake Mary, FL 32795-2945 City & State Lake Mary, FL 32795-2945 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees Country 8.) This corporation has liability for intangible tax under s. 199.032, 32795-2945 U.S.A. 32795-2945 U.S.A. Florida Statutes Yes No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name ABRAMS, LEHN E 801 N. MAGNOLIA AVENUE Street Address (P.O. Box Number is Not Acceptable) SUITE 201 ORLANDO FL 32803 63 64 City 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 file if applicable (NOTE Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE RICHARD PADICCA TITLE 1 1 TITLE Change Addition PADILLA, RICHARD NAME 1.2 NAME 824 GARDENGLENLA POST OFFICE BOX 952945 STREET ADDRESS 1.3 STREET ADDRESS LAKE MARY, FL 32746 LAKE MARY FL 32795-2945 CITY-ST-209 1.4 CITY-ST-ZIP PADILLA, NIDIA
F24GARDENGLENLA
LAKEMARY, FL 32746
Change DELETE TITLE 21 TITLE Addition PADILLA, NIDIA NAME 2.2 NAME POST OFFICE BOX 952945 STHEET ADDRESS 2.3 STREET ADDRESS LAKE MARY FL 32795-2945 CITY - ST - ZIP 2.4 CITY-ST-ZIP DELETE TITLE 3.1 TITLE Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP CHY-ST ZIP DELETE Change THILE 4 1 TITLE Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CHTY-ST-76 4.4 CITY - ST - ZIP DELETE Change TITLE 5.1 TITLE Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS City ST-ZIP 5.4 CITY - ST - ZIP DELETE TITLE 6.1 TITLE Change Addition NAM: 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CHY+ST- ZIP 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 eath; 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

FILED
May 15 1997 8:00am
Secretary of State



3a. Date of Last Report

Daytime Phone # 0000820

3. Date Incorporated or Qualified

11/22/1996