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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # P97000033702

1. Corporation Name

SHOGUN EXOTIC CATS, INC.

Principal Place of Business

Mailing Address

2650 MILITARY TRL.. STE 230 BOCA RATON FL 33431

2650 MILITARY TRL., STE 230 **BOCA RATON FL 33431**

FILED Jun 08, 1999 8:00 am Secretary of State

06-08-1999 90002 023 ***550.00



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualifed

04/15/1997

| NAME NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP A.2 NAME STREET ADDRESS CITY-ST-ZIP L.2 NAME STREET ADDRESS CITY-ST-ZIP L.2 NAME A.3 STREET ADDRESS CITY-ST-ZIP | | | | _ | 0.11.01.00. | | | |
|--|---|---|----------------------------------|--|--|------------------|-------------------|--|
| Solition Part & place 20 | 2. Principal F | | | | _ ** | Appli | ed For | |
| Suite, Apt. 4, 9C. 27 574 27 574 27 574 28 5184e 28 5184e 28 5184e 28 5184e 28 5184e 29 574 30 WAR | 21 600 | 1 Beaucen Jounn PL | W/26/0001 BRAILI | M Kange UKE | <u>εωχ 65-0749697</u> | Not / | Applicable | |
| Fee Required Fee | | | Suite, Apt. #, etc. | -, <u></u> | 1 | T | | |
| Signal Ration St. 00 May be St. 00 May b | | , | 27 504 | | 5. Certificate of Status Desired | Fee Requ | Jired | |
| 23 BOCA KATOL FL 26 BOCA KATOL FL 26 BOCA KATOL FL 27 33 4 8 7 29 1 | | | | \ | 6. Election Campaign Financing | \$5.00 M | ay Be | |
| 24 37 + 8 7 25 39 + 45 7 30 10 30 10 30 10 30 10 30 3 | 23 Baca | 4 RATON FL | 28 BUCA KAT | 2) N FZ | Trust Fund Contribution | Added to | Fees | |
| S. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent | | Country | | | 8. This corporation owes the current year Ir | ntangible | | |
| S. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent | 2a 33° | 487 25 LICA | 29 33487 | 50 11.SA | Personal Property Tax. | ☐ Yes ☐ |]No | |
| KOTTLER, MARK 2850 MILITARY TRL., STE 230 BOCA RATON FL 33431 11. Pursuant to the provisions of Sections 807.0502 and 607.1508. Florids Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florids. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, and familiar with, and accept the obligations of, Section 607.0505, Florids Statutes. SIGNATURE Signation, typed or prilities traine of ingeletined agent and file if isolations. OFFICERS AND DIRECTORS 11.1 TITLE 12. OFFICERS AND DIRECTORS 11.2 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. TITLE 12. OFFICERS AND DIRECTORS 11.3 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. TITLE 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. TITLE 14. ITITLE 15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. TITLE 22. NAME 23. STREET ADDRESS CITY-51.2P 10. CHANGE 10. CHANGE ADDRESS 10. STREET ADDRESS 24. CITY-57.2P 10. CHANGE 10. C | | | t Registered Agent | | 10. Name and Address of New Registered | 1 Agent | | |
| 2850 MILITARY TRL., STE 230 BOCA RATON FL 33431 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 Florids. Such change was authorized by the corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florids. Such change was authorized by the corporation stored directors. I hereby accept the approximent as registered office or registered agent, and armitar with, and accept the obligations of, Sections 607.4505, Florida Statutes. SIGNATURE SIGNATURE 12. OFFICIERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. TITLE PARTICLE OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. TITLE PARTICLE OFFICERS AND DIRECTORS IN 12. 12. OFFICERS AND DIRECTORS IN 12. 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 14. TITLE PARTICLE OFFICERS AND DIRECTORS IN 12. 15. TITLE PARTICLE OFFICERS OFFICERS AND DIRECTORS IN 12. 15. TITLE PARTICLE OFFICERS OFFICERS AND DIRECTORS IN 12. 15. TITLE PARTICLE OFFICERS OFFICERS OFFICERS AND DIRECTORS IN 12. 15. TITLE PARTICLE OFFICERS OFFI | | | | 81 Name | | | | |
| BOCA RATON FL 33431 Back | 2650 MILITARY TRL., STE 230 | | | | (1001 BROKEN JOIN OPKING | | | |
| BOCA RATON FL 33431 STILL STUDY | | | | | | | | |
| 11. Pursuant to the provisions 607 0602 and 607 1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its 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, 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, if an termiliar with, and accept the obligations of, Section 607 0505, Florida Statutes. SIGNATURE SIGNATURE SIGNATURE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. TITLE OFFICERS AND DIRECTORS IN 12. TITLE CANZONETTA, VICTORIA STREET ADDRESS CITY-ST-ZP TITLE DELETE 11 TITLE DELETE 21 TITLE 22 MME 23 STREET ADDRESS CITY-ST-ZP TITLE DELETE 31 TITLE DELETE 31 TITLE ALCITY-ST-ZP TITLE ALCITY-ST-ZP TITLE DELETE 31 TITLE ALCITY-ST-ZP TITLE ALCITY-ST-ZP TITLE DELETE 31 TITLE ALCITY-ST-ZP TITLE DELETE 31 TITLE ALCITY-ST-ZP TITLE ALCITY-ST-ZP TITLE DELETE 31 TITLE ALCITY-ST-ZP ALCITY-ST-ZP TITLE ALCITY-ST-ZP ALCITY-ST-ZP ALCITY-ST-ZP TITLE ALCITY-ST-ZP ALCITY- | | | | | | | | |
| 11. Pursuant to the provisions 607 0602 and 607 1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its 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, 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, if an termiliar with, and accept the obligations of, Section 607 0505, Florida Statutes. SIGNATURE SIGNATURE SIGNATURE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. TITLE OFFICERS AND DIRECTORS IN 12. TITLE CANZONETTA, VICTORIA STREET ADDRESS CITY-ST-ZP TITLE DELETE 11 TITLE DELETE 21 TITLE 22 MME 23 STREET ADDRESS CITY-ST-ZP TITLE DELETE 31 TITLE DELETE 31 TITLE ALCITY-ST-ZP TITLE ALCITY-ST-ZP TITLE DELETE 31 TITLE ALCITY-ST-ZP TITLE ALCITY-ST-ZP TITLE DELETE 31 TITLE ALCITY-ST-ZP TITLE DELETE 31 TITLE ALCITY-ST-ZP TITLE ALCITY-ST-ZP TITLE DELETE 31 TITLE ALCITY-ST-ZP ALCITY-ST-ZP TITLE ALCITY-ST-ZP ALCITY-ST-ZP ALCITY-ST-ZP TITLE ALCITY-ST-ZP ALCITY- | | | | | Soute 504, | | | |
| 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits his statement for the purpose of changing its registered of the corporation's board of directors. I hereby accept the appointment as registered agent, or both, in the State of Florida, Such change was antibotized by the corporation's board of directors. I hereby accept the appointment as registered agent, or both, in the State of Florida Statutes. SIGNATURE Signature, tyred or printer rame of registered agent and title if applicable. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. TITLE NAME CANZONETTA, VICTORIA 2850 N MILITARY TRL, STE 230 13 STREET ADDRESS CITY-ST-2P BOCA RATION FL 33431 DELETE 11 TITLE NAME 22 NAME 23 STREET ADDRESS CITY-ST-2P TITLE DELETE 11 TITLE DELETE 11 TITLE DELETE 31 TITLE DELETE Change Addition Addition Addition Addition Addition Addition Addition ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. Change Addition Addition Addition ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. Change Addition Addition ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. ADDI | | | | 84 City | FI Paris | 85 Zip Co | チク | |
| office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I nereby stocept the application and agent and title if applicable. SIGNATURE SIGNATURE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. TITLE PARTICLE CANZONETTA, VICTORIA STREET ADDRESS CITY-ST-ZIP BOCA RATON FL 33431 DELETE 1 TITLE DELETE 1 TITLE DELETE 1 TITLE DELETE 1 TITLE DELETE 2 STREET ADDRESS CITY-ST-ZIP TITLE DELETE 3 STREET ADDRESS CITY-ST-ZIP TITLE DELETE 3 STREET ADDRESS CITY-ST-ZIP TITLE DELETE 3 STREET ADDRESS CITY-ST-ZIP DELETE 4 STREET ADDRESS CITY-ST-ZIP TITLE DELETE 3 STREET ADDRESS CITY-ST-ZIP TITLE DELETE 3 STREET ADDRESS CITY-ST-ZIP TITLE DELETE 3 STREET ADDRESS CITY-ST-ZIP TITLE DELETE 4 STREET ADDRESS CITY-ST-ZIP DELETE 5 STREET ADDRESS STREET ADRESS STREET ADDRESS STREET ADDRESS STREET ADDRESS STREET ADDR | | 207.050 | 1007.4500 51 | <u> </u> | | 7 در ا | oristered | |
| agent. I am familiar with, and accept the obligations of, Section 607 JOSUS, Florinal Statutes SIGNATURE Signature, typed or printed name of majorithmic agent and tife il applicable. 12. OFFICERS AND DIRECTORS DELETE 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. TITLE NAME CANZONETTA, VICTORIA 2650 N MILITARY TRL, STE 230 BOCA RATON FL 33431 14 GITV-ST-27P TITLE NAME STREET ADDRESS CITY-ST-27P TITLE DELETE 15 TITLE 10 DELETE 21 TITLE 22 NAME 23 STREET ADDRESS CITY-ST-27P TITLE DELETE 31 TITLE 32 NAME 33 STREET ADDRESS CITY-ST-27P TITLE DELETE 41 TITLE 41 TITLE 42 NAME 42 NAME 43 STREET ADDRESS CITY-ST-27P TITLE DELETE 44 CITY-ST-27P TITLE DELETE 44 CITY-ST-27P TITLE DELETE 45 STREET ADDRESS CITY-ST-27P TITLE DELETE 53 STREET ADDRESS CITY-ST-27P TITLE DELETE 54 GITY-ST-27P DELETE 55 STREET ADDRESS CITY-ST-27P TITLE DELETE 55 STREET ADDRESS 56 CITY-ST-27P DELETE 56 STREET ADDRESS 57 CITY-ST-27P DELETE 58 STREET ADDRESS 58 CITY-ST-27P DELETE 58 STREET ADDRESS 58 CITY-ST-27P Change Addition Addition Addition Addition Addition Addition Addition Change Addition Change Addition Change Addition Change Addition Change Addition Addition Addition Addition Addition Change Change | office or | registered agent or both in the State of | of Florida. Such change was au | thorized by the corpo | pration's board of directors. I hereby accept the appo | ointment as regi | stered | |
| Signature lyped or printer name of registered apent and tille if applicable. (NOTE: Registered Apent synature refoured when remistaling) DATE | agent. I a | am familiar with, and accept the obligat | ions of, Section 607.0505, Flori | da Statutes. | · · · · | | | |
| Signature lyped or printer name of registered apent and tille if applicable. (NOTE: Registered Apent synature refoured when remistaling) DATE | SIGNATURE | <u> </u> | | | | | | |
| TITLE NAME CANZONETTA, VICTORIA 12 NAME 12 NAME 13 STREET ADDRESS 14 CITY-ST-ZIP Change Addition Additi | | Signature, typed or printed name of registered agen | | | | | | |
| INMAME CANZONETTA, VICTORIA SIREETADORESS CITY-ST-ZIP BOCA RATON FL 33431 DELETE 12 NAME 13 STREET ADDRESS CITY-ST-ZIP NAME 22 NAME 22 STREET ADDRESS CITY-ST-ZIP TITLE NAME 32 NAME 33 STREET ADDRESS CITY-ST-ZIP TITLE NAME 32 NAME 33 STREET ADDRESS CITY-ST-ZIP TITLE NAME 32 NAME 33 STREET ADDRESS CITY-ST-ZIP TITLE NAME 42 NAME 42 NAME 42 NAME 42 NAME 51 NEET ADDRESS CITY-ST-ZIP TITLE NAME 51 NAM | 12. | | | | ADDITIONS/CHANGES TO OFFICERS A | | | |
| NAME | TITLE | * | ☐ DELETE | 1.1 TITLE | | | _ | |
| NAME | NAME | | | 1.2 NAME | 1000 | Duux# | 504 | |
| NAME | STREET ADDRESS | s 2650 N MILITARY TRL, STE 230 |) | 1.3 STREET ADDRESS | GOOL BROKEN JOHN | 77007 | • , | |
| NAME | CITY-ST-ZIP | BOCA RATON FL 33431 | | 1.4 CITY-ST-ZIP | BUCH RATION PL 3348 | <u> </u> | | |
| NAME | | | ☐ DELETE | 2.1 TITLE | | Change | Addition Addition | |
| 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP | NAME | | | 2.2 NAME | | | | |
| CITY-ST-ZIP | | 5 | | 2.3 STREET ADDRESS | | | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE Addition TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE Addition | | | | 2 4 CITY-ST-ZIP | | | | |
| NAME | | <u> </u> | ☐ DELETE | | | Change | Addition | |
| STREET ADDRESS 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP | | | _ | | | | | |
| CITY-ST-ZIP | | | | | | | | |
| DELETE | | š[| | | | | | |
| NAME NAME 4. 2 NAME 4. 3 STREET ADDRESS CITY-ST-ZIP TITLE DELETE DELETE 5. 1 TITLE NAME 5. 2 NAME 5. 3 STREET ADDRESS CITY-ST-ZIP TITLE DELETE 6. 1 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP OBLETE 6. 3 STREET ADDRESS G. 3 STREET ADDRESS CITY-ST-ZIP SAL CITY-ST-ZIP SAL CITY-ST-ZIP SAL CITY-ST-ZIP SAL CITY-ST-ZIP | | | □ nei etr | | | Change | Addition | |
| STREET ADDRESS CITY-ST-ZIP TITLE DELETE 5.1 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE DELETE 5.2 NAME 5.2 NAME 5.3 STREET ADDRESS CITY-ST-ZIP TITLE DELETE 6.1 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE DELETE 6.3 STREET ADDRESS G.3 STREET ADDRESS G.4 CITY-ST-ZIP S.4 CITY-ST-ZIP S.4 CITY-ST-ZIP | | | | | | onengo | ال ال | |
| A CITY-ST-ZIP | NAME | | | | | | | |
| DELETE DELETE 5.1 TITLE Change Addition | STREET ADDRESS | 3 | | 4.3 STREET ADDRESS | | | | |
| STREET ADDRESS S.3 STREET ADDRESS S.4 CITY-ST-ZIP Change Addition | CITY-ST-ZIP | | | | | | | |
| STREET ADDRESS CITY-ST-ZIP TITLE DELETE 6.1 TITLE NAME STREET ADDRESS 6.3 STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP SA CITY-ST-ZIP SA CITY-ST-ZIP | | | ☐ DELETE | | | ∟ unange | ☐ Addition | |
| SA CITY-ST-ZIP S.4 CITY-ST-ZIP S.4 CITY-ST-ZIP Change Addition | TITLE | | | ■ 52 NAME | | | | |
| ITILE OELETE 6.1 TITLE 6.2 NAME 6.2 NAME 5.3 STREET ADDRESS CITY ST ZIP 6.4 CITY-ST-ZIP | | | | L . | | | | |
| TITLE DELETE 6.1 TITLE Change Addition NAME STREET ADDRESS CITY ST 7IP 6.4 CITY-ST-ZIP | NAME | s | | L . | | | | |
| STREET ADDRESS 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP | NAME STREET ADDRESS | s | | 5.3 STREET ADDRESS | | | | |
| STREET ADDRESS 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP | NAME STREET ADDRESS CITY-ST-ZIP | 5 | ☐ DELETE | 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP | | Change | ☐ Addition | |
| CITY ST 7JP | NAME STREET ADDRESS CITY-ST-ZIP TITLE | 5 | ☐ DELETE | 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 6.1 TITLE | | ☐ Change | Addition | |
| 14. I hereby certify that the information supplied with this filing does not qualify for exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information | NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME | | ☐ DELETE | 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 6.1 TITLE 6.2 NAME | | Change | ☐ Addition | |
| 17. I thousand county man are more managed as a managed of the state o | NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS | | □ DELETE | 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS | | Change | Addition | |
| indicated on this annual report or supplemental angular peport is frue and that my signature shall have the same legal effect as it made under oath; that it am an | NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS | S | | 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP | in Section 119.07(3)(i), Florida Statutes. I further c | - | _ | |
| officer or director of the corporation or the receiver or Musice employerector whecute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 it chapted to on an attachment with an address, which is other like empowered. | NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP | S | | 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP | in Section 119.07(3)(i), Florida Statutes. I further cature shall have the same legal effect as if made un | - | _ | |