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

**PROFIT CORPORATION ANNUAL REPORT** 

1**9**98



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000082901 (4)

**EXOTICA LUMINA, INC.** 

華 本本事

**19** 

Principal Place of Business Mailing Address

## **FILED** Apr 29 1998 8:00am Secretary of State



13155 ARCH CREEK TERRACE NORTH MIAMI FL 33181		13155 ARCH CREEK TERRACE NORTH MIAMI FL 33181		DO NOT WRITE	DO NOT WRITE IN THIS SPACE		
					3. Date Incorporated or Qualified		
2. Principal Place of Business		28. Mailing Address			09/23/1997 4. FEI Number	Applied For Not Applicable	
Suite, Apt. #, etc.			Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State 23		City & State 28			Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip 24	Country 25	Ζ(p)	30 Coun	try	This corporation owes or has p     Personal Property Tax due Juni	e 30. Yes No	
	9. Name and Address of Curre	nt Registered Agent			10. Name and Address of New R	egistered Agent	
	H <b>MAN</b> , DARA		'	<b>31</b> Name	•		
	55 ARCH CREEK TERRACE RTH MIAMI FL 33181				Address (P.O. Box Number is Not Accepta	ress (P.O. Box Number is Not Acceptable)	
			'	33			
			Ī	34 City		FL 85 Zip Code	
11. Pursuent l	to the provisions of Sections 607 056	02 and 607 1508. Florida	Statutes, the ab	nve-name	t corporation submits this statement for the		
office or re agent. I a	egistered agent, or both, in the State m familiar with, and accept the oblig	e of Florida. Such change pations of, Section 607.05	was authorized 05, Florida Statu	by the co tes.	d corporation submits this statement for the reporation's board of directors. I hereby acce	pt the appointment as registered	
SIGNATURE	Signature typed or printed name of rugistered ag	ent and title if applicable	(NO1E: Registered	Agent signatu	re required when reinstating)	DATE	
12.		ID DIRECTORS	13.	<b>B</b>	ADDITIONS/CHANGES TO OFFI	CERS AND DIRECTORS IN 12	
TITLE	D	☐ DELE	TE 1.1 TITE	E		Change Addition	
NAME	RICHMAN, DARA		1.2 NAM	4E			
STREET ADDRESS	13155 ARCH CREEK TERRAC	CE	1.3 STR	eet address	ł	*.	
CITY-ST-ZIP	NORTH MIAMI FL 33181			-ST-ZIP			
TITLE .		☐ DELET	FE 2.1 TITL	<b>E</b>		☐ Change ☐ Addition	
NAME			2.2 NAM	<b>NE</b>			
STREET ADDRESS			2.3 STR	EET ADDRESS			
CITY-ST-ZIP				Y - ST - <i>Ž</i> IP			
TITLE		☐ DELE				Change Addition	
NAME			3.2 NAN				
STREET ADDRESS			3.3 STR	EET ADDRESS			
CITY-ST-ZIP		Попе		Y-ST-ZIP		Observe Address	
TITLE		☐ DELET	1			Change Addition	
NAME			4. 2 NA				
STREET ADDRESS			•	EET ADDRESS			
CITY-ST-ZIP		DELET		r-ST-ZIP		Change	
TITLE		ב_] זונננו				Change Addition	
NAME			5.2 NAN	-	1		
STREET ADDRESS				EFT ADDRESS	1	<b>\</b>	
CITY-ST-ZIP		D. D. L. E.		r-ST-ZIP		Chapma Addition	
TITLE		LJ DELET				Change Addition	
NAME			6.2 NAM				
STREET ADDRESS			6.3 S1R	eet address			

14. Thereby certify that the information supplied with this filling 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.