


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 19, 2004 08:00 AM
Secretary of State

DOCUMENT # P96000002763
 1. Entity Name
 PACIFIC INTERNATIONAL ENTERPRISES, INC.



Principal Place of Business Mailing Address
 2029 QUAIL ROOST DR 2029 QUAIL ROOST DR
 WESTON, FL 33327 WESTON, FL 33327

DO NOT WRITE IN THIS SPACE



03062004 No Chg-P CR2E034 (10/03)

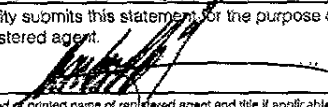
4. FEI Number Applied For
 65-0639078 Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
 CELI, CARLOS A
 2029 QUAIL ROOST DR
 WESTON, FL 33327

DO NOT WRITE IN THIS SPACE

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE:  Carlos A. Celi 3/6/04
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

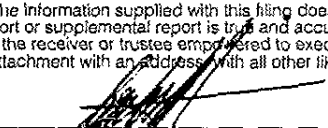
U00000117161
 04/19/04-80008-013 150.00

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	CELI, CARLOS A
STREET ADDRESS	2029 QUAIL ROOST DR
CITY-ST-ZIP	WESTON, FL 33327
TITLE	D
NAME	CELI, MAYRA A
STREET ADDRESS	2029 QUAIL ROOST DR
CITY-ST-ZIP	WESTON, FL 33327
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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12. I 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE:  Carlos A. Celi 3/6/04 954 389-0394
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #