

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000078443

FILED
Mar 13, 2007
Secretary of State

Entity Name: MID PACIFIC CORPORATION

Current Principal Place of Business:

16121 BISCAYNE BOULEVARD
AVANTI PLAZA
NORTH MIAMI, FL 33160

New Principal Place of Business:

Current Mailing Address:

16121 BISCAYNE BOULEVARD
AVANTI PLAZA
MIAMI, FL 33160

New Mailing Address:

FEI Number: 65-1033551 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

POMPEI, CARLOS
16121 BISCAYNE BOULEVARD
AVANTI PLAZA
NORTH MIAMI, FL 33160 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: POMPEI, EMIDIO
Address: 3820 EAST LAKE STATES DR
City-St-Zip: DAVIE, FL 33328

Title: D () Delete
Name: MICHEL, POMPEI
Address: 3115 NW 100 CT
City-St-Zip: MIAMI, FL 33178

Title: D () Delete
Name: POMPEI, CARLOS
Address: 5570 NW 107 AVE.
City-St-Zip: MIAMI, FL 33178

Title: V () Delete
Name: POMPEI, MARITZA
Address: 3820 EAST LAKES DR
City-St-Zip: DAVIE, FL 33328

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: EMIDIO POMPEI

PD

03/13/2007

Electronic Signature of Signing Officer or Director

_____ Date