2000 UNIFORM BUSINESS REPORT (UBR)

changed, or on an attachment with an address, with all other like empowered.

NATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED Feb 27, 2000 8:00 am Secretary of State DOCUMENT # **594659** 1. Entity Name PACIFIC INTERNATIONAL ACQUISITIONS, INC. 02-27-2000 90072 001 *3,776.25 Mailing Address Principal Place of Business 11098 BISCAYNE BLVD., SUITE #402 11098 BISCAYNE BLVD.. SUITE #402 N MIAMI FL 33161-7491 9291 N MIAMI FL 33161 3. Mailing Address 2. Principal Place of Business DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State 4. FEI Number City & State 59-1879753 Not Applicable Zip Zip Country \$8.75 Additional Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name BEDZOW, MICHAEL Street Address (P.O. Box Number is Not Acceptable) 20803 BISCAYNE BLVD SUITE 200 **AVENTURA FL 33180** Zio Code FL 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. SIGNATURE (NOTE: Registered Agent signature required when reinstating) DATE Signature, typed or printed name of registered agent and title if applicable. FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2000 Fee will be \$550.00 Added to Fees Trust Fund Contribution. (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN [11 OFFICERS AND DIRECTORS 12. 11. ☐ Addition PTD Delete TITLE TITLE BEDZOW, CHARLES NAME NAME STREET ADDRESS 11098 BISCAYNE BLVD #402 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP N. MIAMI FL 33161 Change ☐ Addition VSD ☐ Delete TITLE TITLE BEDZOW, SARA NAME NAME 11098 BISCAYNE BLVD #402 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP N. MIAMI FL 33161 Change Change ☐ Addition Delete 🔀 TITLE TITLE BLANCO, CAMILO NAME NAME 11098 BISCAYNE BLVD #402 STREET ADDRESS STREET ADDRESS Delete CITY-ST-ZIP CITY-ST-ZIP MIAM! FL 33161 ☐ Addition ☐ Delete TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CiTY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 13. 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 11 or Block 12 if

Charles Bedzow

305-891-7987

Daytime Phone #