**FILED** 

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## 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 # F9500001886 1. Corporation Name

PACIFIC UNITED DEVELOPMENT CORP.

				-(		/#   B	
Principal Place of Business	e of Business Mailing Address			( 1991199 14:9 14:91 Bliff Bliff Balli	.,		
445 MIDWAY ROAD LUITE 106 :ARROLLTON 1X 75006	2445 MIDWAY ROAD SUITE 106 CARROLLTON TX 75006 US			DO NOT WRITE IN THIS SPACE			
IS				3. Date Incorporated or Qualifed 04/18/1995			
2. Principal Place of Business,	2a. Mailing Address		•	4. FEI Number		Applied For	
	ue. [26] 17505 W. Cata-	، کار	a Ave.	75-2504956		Not Applicable	
Suite, Apt. #, etc.	Suite, Apt. #, etc.	Suite, Apt. #, etc.			• -	5 Additional e Required	
City & State  Corne lius, NC	City & State	City & State			·	00 May Be led to Fees	
Zip Country 1 25 25		intry		8. This corporation owes the current year Intangible Personal Property Tax.			
9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
THE PRENTICE-HALL CORPORATION SYSTEM, INC. 1201 HAYS STREET		81	Name				
		82	32 Street Address (P.O. Box Number is Not Acceptable)				
SUITE 105 TALLAHASSEE FL 32301		83	-				
INDIA INCORE I E OSOO I		84	City		85	Zip Code	

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 Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

IGNATURE				DATE	
	Signature, typed or printed name of registered agent and title if applicable	e. (NOTE: Re		required when reinstating) DATE	
2.	OFFICERS AND DIRECTORS		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1	
TLE	P	☐ DELETE	1.1 TITLE	Change [] Ad	dition
₩E	BRADLEY, COLEMAN		1.2 NAME	Coleman C. L. J. Amare # 350	,
REET ADDRESS	2445 MIDWAY ROAD, SUITE 108-		1.3 STREET ADDRESS	17505 U. (CHAWLA HORNAC,	Í
TY-ST-ZIP	CARROLLTON TX		1.4 CITY-ST-ZIP	Coleman Bradley Mchange Add 17505 U. Catawka Avenue, #350 Comeling NC 28031	
TLE	S	DELETE	2.1 TITLE	☐ Change ☐ Ad	dition
AME	PORTER, CATHRYN L	-	2.2 NAME		1
TREET ADDRESS	3200 SOUTHWEST FREEWAY, #1200		2.3 STREET ADDRESS		
TY-ST-ZIP	HOUSTON TX 77027		2. 4 CITY-ST-ZIP		
TLE	T	DELETE	3.1 TITLE	Change Ad	1
AME	MCCRAW, MICHAEL K		3.2 NAME	Microw Michael Barkway # 200 2740 N. Dallos Parkway # 200 Plano TX 75093	۱ د
TREET ADDRESS	5999 SUMMERSIDE, SUITE 112		3.3 STREET ADDRESS	2 140 N. Valles 1012019	
TY-ST-ZIP	DALLAS TX 75252		3.4. CITY-ST-ZIP	1 Marg TX 75075	
TLE	D	☐ DELETE	4.1 TITLE	Bandlay Bill a Dechange Ad	dition
AME	BRADLEY, BILL		4.2 NAME	Bradley Bills Parkway #200	
TREET ADDRESS	5990 SUMMERSIDE, SUITE 112	• • •	4.3 STREET ADDRESS	2740 10. 021001	
TY-ST-ZIP	DALLAS TX 75252		4 4 CITY-ST-ZIP	Plano, (X 1301)	
TLE -	C-See	DELETE	5.1 TITLE	Secretary D Change Ad	dition (
AME	HOSEA, GINA		5.2 NAME	Gina Hose Kay 17505 m Catambe Avenue #357	ן כ
TREET ADDRESS	2445 MIDWAY ROAD, SUITE 106		5.3 STREET ADDRESS	17505 W. (atawa	1
ITY-ST-ZIP	CARROLLTON TX		5.4 CITY-ST-ZIP	Cornelius, 100 20031	
TLE		DELETE	6.1 TITLE	Change Ad	dition
AME			6.2 NAME		
TREET ADDRESS			6.3 STREET ADDRESS		
TV-ST-79P			6.4 CITY-ST-ZIP		

4. 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 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 a 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 a state of the receiver or trustee empowered.

SIGNATURE: