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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F9600000615 (2)

PACIFICA YACHTING CORP. LTD.

FILED Apr 24 1997 8:00am Secretary of State



Principal Place of Business Mailing Address							
			Λ4				
1600 SE 17TH ST., STE. 404 FT. LAUDERDALE FL 33316		1600 SE 17TH ST., STE. 404 FT. LAUDERDALE FL 33316-1717					
					3. Date Incorporated or Qualified 02/06/1996	3a. Date of Las	l Report
	Place of Business	2a. Mailing Address		4. FEI Number		Applied For	
21		26		0.000.00		Not Applicable	
Suffe, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired		Fee Required	
··· Ony & State		City & State		6. Election Campaign Financing \$5.00 May Be			
23	28				Trust Fund Contribution		d to Fees
Zip	Country	Zip	Countr	ý	8. This corporation has liability for in	itangible tax unde Yes M . No	rs. 199.032,
24	25 9. Name and Address of Curren		30		Florida Statules L 10. Name and Address of New Reg		
114		it nagiatered Agent	81	Name	10. Humb and Addition of their rieg	interior dispersion	
HAYES, WARREN D SR.							
	I ROYAL POINCIANA PLAZA	82 Street Ac		Street Add	ress (P.O. Box Number is Not Acceptabl	e)	
PA	LM BEACH FL 33480		83				
			84	City		FL 85 Z	ip Code
11. Pursuan office or agent. I	t to the provisions of Sections 607.050 registered agent, or both, in the State am familiar with, and accept the obliga	o2 and 607.1508, Florida Statute of Florida. Such change was a ations of, Section 607.0505, Flo	es, the above authorized b orida Statute	e-named corp y the corpora es.	poration submits this statement for the pution's board of directors. I hereby accep	urpose of changing the appointment	g its registered as registered
SIGNATURE	Signature, typed or printed name of registered age	ont and title if applicable. (NOT)	L: Registered Aç	jeni signature requi	ired when reinstating)	DATE	
12.	OFFICERS AN	D DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICE		
TITLE	CPST	☐ DELETE	1.1 TITLE	}		Chang	e 🔲 Addition
NAME	POSSATI, MARCO		1.2 NAME				
STREET ADDRESS			1.3 STREE	1 ADDRESS			
CITY-ST-ZIP	COCOANUT GROVE FL 33133		1.4 CITY -	\$1-ZIP			
TITLE	AS DELETE		2.1 TITLE			[_] Chang	ge 🔲 Addition
NAME	HAYES, WARREN D SR.		2.2 NAME				
STREET ADDRESS		A	2.3 STREE	T ADDRESS			
CITY-ST-ZIP	PALM BEACH FL 33480		2. 4 CHY	·S1 - ZIP			4 8400
TITLE		☐ DELETE	3.1 TITLE			L Chang	ge L. Addition
NAME	· ·		3.2 NAME				
STREET ADDRESS	⁵			T ADDRESS			
CITY-ST-ZIP		DELETE	3 4. CITY	-S1-ZIP		Chang	ne Addition
TITLE			4.1 TITLE	.			, Li noution
NAME			4. 2 NAMI				
STREET ADDRESS	·			T ADDRESS			
CITY-ST-ZIP TITLE		DELETE	4.4 CITY- 5.1 TITLE	31-ZIF		Chang	e Addition
NAME		, pp.c.,p	5.2 NAME				
	,			1 ADDRESS			
STREET ADDRESS CITY-ST-ZIP	` 		5.4 CITY-	1			
TITLE		☐ DELETE	6.1 TITLE			Chang	e
NAME			6.2 NAME				
STREET ADDRESS			1	1 ADDRESS			
	'		6.4 City				
CITY-ST-ZIP		1. 30. 41.1. 40	0.4 OILL		d in Continu 110 07(3\(i) Elerida Statutor	Lifurther contifut	not the

4. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statules. 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.

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