## SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998. AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

19**9**8

Delegiant Black of Business

DOCUMENT # F9700004977 (1)

PACIFIC SOUTHEAST DEVELOPMENT, INC.

r illicipal riac	C OI DUSINGSS	Maining Address				•
9602 VENICE BLVD. CULVER CITY CA 90232		9602 VENICE BLVD.				
COLVER CITT	CM BUESE	CULVER CITY CA 80232			DO NOT WRITE IN THIS I	RPACE
					3. Date Incorporated or Qualified	OT NOL
P					09/23/1997	
2. Principal Place of Business 2a, Mailing Address					4. FEI Number	
<u> </u>					ــ بنت سنخب	Applied For
21		26			95-4652327	Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.			5, Certificate of Status Desired	\$8.75 Additional
22		27				Fee Required
City & State		City & State	City & State		6. Election Campaign Financing	\$5.00 May Be
23		[28]	<u> </u>		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country		This corporation owes or has paid the curre	nt year Intangible
24	25	29	30		Personal Property Tax due June 30.	Yes X No
	9. Name and Address of Curren	nt Registered Agent			10. Name and Address of New Registered A	gent
NRA	I SERVICES, INC.		81	Name		
526 E. PARK AVE.				<u> </u>	608	·
	LAHASSEE FL 32301		82 Street Add		ddress (P.O. Box Number is Not Acceptable)	
IAL	DAINGOLL IL GEGGI		83			<del></del>
			"			
			84	City		85 Zip Code
			. <u> </u>		<u> </u>	:
11. Pursuani	t to the provisions of sections 607.050	2 and 607.1508, Florida Statute	es, the above	named co	prporation submits this statement for the purpose of cha	nging its registered
agent. I	registared agent, or both, in the State am familiar with, and accept the oblig	ations of, section 607,0505, Fi	orida Statutes	ine corpo S.	oration's board of directors. I hereby accept the appoint	ment as registered
SIGNATURE	, ,					
OIOII/II DILE	Signature, typed or printed name of registered age	nt and title if applicable (No	OTE: Registered A	gent signature	a required when reinstating) DATE	
12.		ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AND	DIRECTORS IN 12
TITLE	DPS	DELETE	1.1 TITLE			Change Addition
NAME	Krumpe, Robert		1.2 NAME		<del></del>	
STREET ADDRESS	9602 VENICE BLVD.		1.3 STREET	ADDRESS		
CITY-ST-ZIP	CULVER CITY CA 90232		1.4 CITY-ST			
TITLE	V	► Apriere	2.1 TITLE	-211		Tal [7] A.177
	DIGALBO, DONALD	DELETE			L	☐ Change ☐ Addition ☐
NAME	9602 VENICE BLVD.	•	2.2 NAME			
STREET ADDRESS			2 3 STREET	ADDRESS		•
CITY-ST-ZIP	CULVER CITY CA 90232		2 4 CITY-ST			
TITLE	8	DELETE	3.1 TITLE		Secretary Paula Chadwell 9602 Venice Blud	Change X Addition
NAME	KRUMPE, ROBERT	* *	3.2 NAME	'	Paula Chadwell,	
STREET ADDRESS	9602 VENICE BLVD.		3.3 STREET	ADDRESS	9602 Venice Blud	
CITY-ST-ZIP	CULVER CITY CA 90232		3.4 CITY-ST	-ZIP (	Culver City CA 90232	
TITLE		DELETE	4.1 TITLE			Change Addition
NAME		f1 octove	4.2 NAME		_	
STREET ADDRESS			4.3 STREET	AUDBESS		
CHTY-ST-ZIP			4.4 CITY-ST	-217		7
TITLE		L_J DELETE	5.1 TITLE		L	_ Change
NAME			5.2 NAME			
STREET ADDRESS			5.3 STREET	ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST	ZIP		
TITLE		DELETE	6.1 TITLE			Change Addition
NAME			6.2 NAME	- 1		
STREET ADDRESS			6.3 STREET	ADDRESS		
CITY.ST. ZID			e a city et	7(0)		

14. 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 supplied 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 of the receiver of 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 an attachment with an address.

Oct 07 1998 8:00am

Secretary of State