2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# F98000003388

Entity Name: PACIFIC SHORE FUNDING INC.

FILED Apr 08, 2003 Secretary of State

Current Pr	incipal Place o	of Business:	New Principal Place of Business:		
	E CENTER DR EST, CA 92630				
Current Ma	ailing Address	:	New Mailing Address:		
	E CENTER DR EST, CA 9263(
FEI Number:	33-0352433	FEI Number Applied For ()	FEI Number Not Appli	icable () C	ertificate of Status Desired ()
Name and	Address of Cu	ırrent Registered Agent:	Name and	Address of Nev	v Registered Agent:
1201 HAYS	TION SERVICE STREET SEE, FL 3230°				
The above in the State		ubmits this statement for the pu	rpose of changing it	s registered offic	e or registered agent, or both,
SIGNATUR	RE:				
	Electronic	Signature of Registered Agen	t		Date
	npaign Financing	Trust Fund Contribution ().	ADDITION	S/CHANGES TO	OFFICERS AND DIRECTORS
Title: Name: Address: City-St-Zip:	SD ()E WOLFE, TERRY 22391 BAYBERR MISSION VIEJO,	RY	Title: Name: Address: City-St-Zip:	() Ch	ange () Addition
Title: Name: Address: City-St-Zip:	S (X) I MARTIN, DALE A 5 MARSEILLE LAGUNA NIGUEL		Title: Name: Address: City-St-Zip:	() Ch	ange () Addition
Title: Name: Address: City-St-Zip:	EVPF () E KO, LI-LIN 12 AZALEA IRVINE, CA 9262	Delete 20	Title: Name: Address: City-St-Zip:	EVPF (X) CH KO, LI-LIN 16 BELLA ROSA IRVINE, CA 92620	nange () Addition
Title: Name: Address: City-St-Zip:	PCOB () [EATON, EDWAR 626 A CLUBHOU NEWPORT BEAC	SE DRIVE	Title: Name: Address: City-St-Zip:	() Ch	ange () Addition
Title: Name: Address: City-St-Zip:	TCFO ()[CAUGHMAN, DO 1302 CALLE ALC SAN CLEMENTE	CAZAR	Title: Name: Address: City-St-Zip:	() Ch	range () Addition
Title: Name: Address: City-St-Zip:	VP () E GROE, ROBIN 14 BIG DIPPER O NEWPORT BEAC		Title: Name: Address: City-St-Zip:	() Ch	ange () Addition

I hereby certify that the information supplied with this filing does not qualify for the 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 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.

	Flacture is Oissue town of Oissuing Officers on Discrete		D-4-
SIGNATURE:	DOREEN CAUGHMAN	TCFO	04/08/2003