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

FILED Apr 21 1998 8:00am PROFIT FLORIDA DEPARTMENT OF STATE **CORPORATION** Sandra B. Mortham Secretary of State ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1998 POCUMENT # (0)PACIFIC INTERNATIONAL MARKETING, INC. Principal Place of Business Mailing Address 11098 BISCAYNE BLVD 11098 BISCAYNE BLVD SUITE 402 SUITE 402 DO NOT WRITE IN THIS SPACE NORTH MIAMI FL 33161 NORTH MIAMI FL 33161 3. Date Incorporated or Qualified 12/12/1988 2. Principal Place of Business 2a. Mailing Address FEI Number Applied For 65-0191729 Not Applicable 21 26 Suite, Apt. #. etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 23 28 Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible Yes ☐ No 30 Personal Property Tax due June 30. 24 25 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name BEDZOW, MICHAEL 20803 BISCAYNE BLVD 82 Street Address (P.O. Box Number is Not Acceptable) SUITE 200 83 AVNETURA FL 33261-9002 Zip Code 84 City 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. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) DATE 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. TITLE DELETE 1.1 TITLE Change Addition NAME BEDZOW, CHARLES 1.2 NAME CR2E034 11098 BISCAYNE BLVD #402 STREET ADDRESS 1.3 STREET ADDRESS N MIAM! FL 33/6 1.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition 21 TITLE TITLE DVS BEDZOW, SARA NAME 2.2 NAME 11098 BISCAYNE BLVD #402 2.3 STREET ADDRESS STREET ADDRESS N MIAMI FL 2.4 CITY-ST-ZIP CITY-ST-ZIP X Addition DELETE 3.1 TITLE SHAPIRO; HOWARD-BLANCY, CAMILY 11098 BISCAYNE BL 3.2 NAME NAME 11098 BISCAYNE BLVD #402 3.3 STREET ADDRESS STREET ADDRESS N MIAMI FL CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE 4.1 TITLE TITLE SHAPIRO, HOWARD 4. 2 NAME NAME 11098 BISCAYNE BLVD #402 STREET ADDRESS 4.3 STREET ADDRESS N MIAMI FL CITY-ST-ZIP 4.4 CITY - ST- ZIP DELETE Change Addition TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS **5.3 STREET ADDRESS**

5.4 CITY-ST-ZIP

6.3 STREET ADDRESS 6.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

DELETE

14. Thereby 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 gryan attagrament with an address. SIGNATURE:

CITY-ST-ZIP

STREET ADDRESS

NAME

☐ Change

Addition