

2001 UNIFORM BUSINESS REPORT (UBR)

FILED

May 03, 2001 8:00 am
Secretary of State

05-03-2001 90997 038 ***150.00

DOCUMENT # K50648

1. Entity Name

PACIFIC INTERNATIONAL MARKETING, INC.

Principal Place of Business

11098 BISCAYNE BLVD
SUITE 402
NORTH MIAMI FL 33161

Mailing Address

11098 BISCAYNE BLVD
SUITE 402
NORTH MIAMI FL 33161

2. Principal Place of Business

20803 Biscayne Blvd
Suite, Apt. #, etc.

Ste 200

City & State

Aventura, FL

3. Mailing Address

20803 Biscayne Blvd
Suite, Apt. #, etc.

Ste 200

City & State

Aventura, FL

Zip
33180

Country
USA

Zip
33180

Country
USA



DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0191729

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

BEDZOW, MICHAEL
20803 BISCAYNE BLVD
SUITE 200
AVNETURA FL 33261-9002

7. Name and Address of New Registered Agent

Name

OLGA L. ALEMAN, LL.M.

Street Address (P.O. Box Number is Not Acceptable)

City

Aventura

FL

Zip Code

33180

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

4-23-01

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE DPT
NAME BEDZOW, CHARLES
STREET ADDRESS 11098 BISCAYNE BLVD #402
CITY-ST-ZIP N MIAMI FL 33161 ☒ Delete

TITLE DVS
NAME BEDZOW, SARA
STREET ADDRESS 11098 BISCAYNE BLVD #402
CITY-ST-ZIP N MIAMI FL 33161 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PSTD
NAME MICHAEL BEDZOW, ESQ.
STREET ADDRESS 20803 BISCAYNE BLVD #200
CITY-ST-ZIP Aventura, FL 33180 ☐ Change ☒ Addition

TITLE V
NAME ALAN M. DAVID
STREET ADDRESS 20803 BISCAYNE BLVD #200
CITY-ST-ZIP Aventura, FL 33180 ☐ Change ☒ Addition

TITLE V
NAME SUSAN ALPER
STREET ADDRESS 20803 BISCAYNE BLVD #200
CITY-ST-ZIP Aventura, FL 33180 ☐ Change ☒ Addition

TITLE V
NAME SCOTT W. MILLER
STREET ADDRESS 20803 BISCAYNE BLVD #200
CITY-ST-ZIP ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/25/01 305/891-2987
Date Daytime Phone #

CR2E034 (10/00)