2000 UNIFORM BUSINESS REPORT (UBR) FILED Feb 27, 2000 8:00 am Secretary of State **DOCUMENT # L72297** 1. Entity Name PACIFIC INTERNATIONAL REALTY, INC. 02-27-2000 90072 001 *3.776.25 Principal Place of Business Mailing Address 11098 BISCAYNE BLVD. 11098 BISCAYNE BLVD. SUITE 401 SUITE 401 9296 MIAMI FL 33161 MIAMI FL 33161-7491 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 65-0194453 Not Applicable Zip Country Country Zip \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name BEDZOW, MICHAEL Street Address (P.O. Box Number is Not Acceptable) 20803 BISCAYNE BLVD SUITE 200 AVENTURA FL 33180 City Zip Code FL 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 FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2000 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 111 PTD TITLE ☐ Delete TITLE Change Addition BEDZOW, CHARLES STREET ADDRESS STREET ADDRESS 11098 BISCAYNE BLVD #402 CITY-ST-ZIP CITY-ST-ZIP MIAMI FL 33161 **VSD** TITLE ☐ Delete TITLE ☐ Change ☐ Addition BEDZOW, SARA NAME NAME STREET ADDRESS STREET ADDRESS 11098 BISCAYNE BLVD #402 CITY-ST-ZIP CITY-ST-ZIP **MIAMI FL 33161** TITI F VAS 🙇 Delete Change ☐ Addition TITLE NAME **BLANCO, CAMILO** NAME STREET ADDRESS STREET ADDRESS 11098 BISCAYNE BLVD #402 Delete CITY-ST-ZIP CITY-ST-ZIP **MIAMI FL 33161** Addition ☐ Delete Change TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Addition TITI F ☐ Delete TITLE Change NAME NAME STREET ADDRESS STREET ADDRESS

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

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-7IP

TITLE

SIGNATURE:

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

TITLE

MATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

☐ Delete

Charles Bedzow

305-891-7987

Change

Addition

Daytime Phone #