FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT

1996



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT #

1. Corporation Name

L95519

(9)

PACASI'S, INC.

g Address	

				·~··{	<u> </u>	
Principal Place	of Business	Mailing Address		1 (981187) 878 1878 1878 1878		
801 N CONG	RESS AVE	290 FOXTAIL DRIVE E	00.44E 04.06			
755 BOYNTON BCH FL 33435		WEST PALM BEACH FL (WEST PALM BEACH FL 33415-6195		To Date the December of the Control	
US	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	••		3. Date Incorporated or Qualified 08/20/1990	3a. Date of Last Report 05/01/1995	
2. Principal Pla	ice of Business	2a. Mailing Address	- Lacous	4. FEI Number	Applied For	
21		26 6 82 HAR	BOUR GREENS I)R 65-0222301	Not Applicable \$8.75 Additional	
Suite Apt. #	ŧ, etc	Suite, Apt #, etc.		5. Certificate of Status Desired	Fee Required	
City & State		City & State		6. Flection Campaign Financing	\$5.00 May Be	
23		28 LAKE WER	TH FLORIDA	Trust Fund Contribution	Added to Fees	
Zip	Country	Zip	Country	8. This corporation has liability for i	intang ble tax under s. 199.032,	
24	25		30 PALM BEACH	Florida Statutes res 10. Name and Address of New R	No	
	Name and Address of Curre	nt Registered Agent	81 Name	10. Name and Address of New F	legistereo Agent	
V46E 11	APAFTY				4.)	
	KASE HARVEY 2 36 FO XTAIL Dr IVE		82 Street Add	82 Street Address (P.O. Box Number is Not Acceptable) 6182 HARBOURGREENS DRIVE		
APT E	VIAIL DRIVE		83	1111130-11-11-1		
	ALM BCH FL 33415		84 City		85 Zip Code	
			1 1 7 7/	1 AKE WOKI 1-) FL 33467		
or register	o the provisions of Sections 607.050 ed agent, or both, in the State of Flo th, and accept the obligations of, Sec	rida. Such change was authorized	, the above named corpo Lby the corporation's boa	oration submits this statement for the pur and of directors. I hereby accept the app	rpose of changing its registered office ointment as registered agent. I am	
SIGNATURE _	Signature, typed or priving many of registered age	or and the transferring. (Nation	Reserving Appet sign at my negati	not when rear stability	ĐA*L	
12.		ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFF	ICERS AND DIRECTORS IN 12	
TITLE	PVTS	DELETE	1 1 TITLE		Change Addition	
NAME	KASE, HARVEY		12 NAME	103 11403 10 60		
STREET ADDRESS	236-E FOXTAIL DR		13 STREET ADDRESS	189 HAKBOOK GKI	LENS DRIVE	
CITY-ST-ZIP	WEST PALM BEACH FL	T DELETE	14 CHY-ST-ZIP L	182 HARBOUR GRI -AKE WORTH F	Change Addition	
TITLE		[_] DELETE	2 1 TITLE 22 NAME		- Sitaige Neamen	
NAME Proces 1000500			2.3 STREET ADDRESS			
STREET ADDRESS			2 4 CITY - ST - ZIP			
CITY-ST-ZIP TITLE		☐ DELETE	3 1 TITLE		Change Addition	
NAME		_	3.2 NAME			
STREET ADDRESS			3.3 STREET ADDRESS			
CITY - ST - ZIP			3.4 CITY - ST - ZIP			
TITLE		☐ DELETE	4 1 TIFLE		☐ Change ☐ Addition	
NAME			4 2 NAME			
STREET ADDRESS			4 3 STREET ADDRESS			
CITY - ST - ZIP	<u> </u>	□ DELETE	4 4 C(TY - \$1 - Z(F) 5 + T(TLF		Change Addition	
TITLE			5.2 NAME		<u> </u>	
NAME STREET ADDRESS			5 3 STREET ADDRESS			
CITY-ST-ZIP			5 4 CITY - S1 - ZIP			
TITLE		DELETE	6 1 TITLE		Change Addition	
NAME			6.2 NAME			
STREET ADDRESS			6.3 STHEFT ADDRESS			
2.7 07. 712			6.4 O(TV - \$1 - 7)P			

14. I do hereby certify that the information supplied with this firing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 empoyered 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 on an attachment with an address.

SIGNATURE: HARVEY KASE

April 10,199

407 738-6077