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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMEN, OF STATE

Sandra B. Mos

Secretary of \$ DIVISION OF CORP RIONS

(9)

FILED May 14 1997 8:00am Secretary of State

OCUMENT Corporation Name	#	L955	19
Corporation Name	11	L900	ı

PACASI'S, INC.

Principal Piac	e of Business	Mailing Address		r constant eine terfet etter i thete bett bindt etekt gebil gebil gebil bindt bindt bindt
801 N CONGR 755 BOYNTON BC		6182 HARBOUR GREEN LAKE WORTH FL 33467- US	6833	
US		-		3. Date Incorporated or Qualified
2. Principal P	lace of Business	2a. Mailing Address		4. FEI Number
21		26 6182 HARR	wrakas	5 DRIVE 65-0222301 Not Applicable
Suite, Apt	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired \$8.75 Additional Fee Required
City & Stat	6	City & State 28 3767 -68		6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
Ζφ 24	Country 25	Z (p	30 ° "G	This corporation has liability for intengible tax under s. 199.032, Florida Statutes Yes No.
	9. Name and Address of Cur	rrent Registered Agent		10. Name and Address of New Registered Agent Name
AP1 WE	FOXTAIL DRIVE FE TO ST PALM BOH FL 33415	OEA2 and 607 1509 Florida Stat	3 4 C	Street Address (P.O. Bax Number is Not Acceptable) 6182 HARZOL GREATE DRIVE City LAVE WOLH FL 85 32 Code Daniel connection as both this state of the state of t
office or agent. Fa	registered agent, or both, in the S am familiar with, and accept the of Signature, typest or printed name of registers	ongations of, Section 607.0303,	rionda di	named corporation submits this statement for the purpose of changing its registered he corporation's board of directors. I hereby accept the appointment as registered
12.	OFFICERS	AND DIRECTORS	13	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE NAME STREET ADDRESS	PVTS KASE, HARVEY 6182 HARBOUR GREENS I	DRIVE	1.1 1.2 [±] 1.3 [±] T ADDR	PATHUA KASE
CITY-ST-ZIP	LAKE WORTH FL		14 ST - ZIP	THE WASTE WASTE TO THE TOTAL T
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NAME		****	22	Last change Li Addition
STREET ADDRESS			2.3 T ADOR	DRESS
CITY: ST-ZIF			2. 4.ST-ZIP	ZIP
THILE		DELETE	3.1	☐ Change ☐ Addition
NAME			3.2	The state of the s
STREET ADDRESS			3.3 ADDRI	DRESS
City SI-ZiP			3.4.ST-ZIP	ne l
THE		DELETE	4.1	☐ Change ☐ Addition
NAME			4.2	TOURIUM LEAD NOW INCOME.
STREET ADDRESS			4.3 ADDRE	ORESS
CITY CT 200			a a T - ZiP	P

6.4 (ZIP C TY-S1-7(P 14. Too hereby certify that the information supplied with this filling does not quality for the point 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 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 jeceive or trustee empowered to te this report as required by Chapter 607, Florida Statutes; and that my name I am an officer or director of the corporation or tappears in Block 13 or Block 13 if changes

5.1

5.21

5.3 ADDRESS

6.3 SDDRESS

5.4 (- ZIP

6.11

6.21

SIGNATURE

III.E

NAME

NAME

STREET ADDRESS

STREET ADDRESS

CUTY - ST - ZIP

DELETE

DELETE

Change

Change

Addition

☐ Addition