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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

FILED Jan 31 1997 8:00am Secretary of State

	1997										
DOCUMENT # M05919 (9) 1. Corporat on Name C. PACIFIC INC.											
C. PACIFIC INC.											
Principal Plac	e of Business		Mailing Address		*·····					ILOM ANDII DIAM	DIRECTOR OF STREET
1550 N.W. 17 AVE. MIAMI FL 33125-2325			1550 N.W. 17 AVE. MIAMI FL 33125-2325				i				
						1	O/02/1984	or Qualified		ate of Last F 01/1996	
2. Principal F	Place of Business	6	2a. Mailing Address				El Number 59-2449877	٠.			pplied For ot Applicable
Suite, Apt.	#, etc.		Suite, Apt #, etc.								Additional
22			27			5. 0	Certificate of Status	s Desired			equired
City & Stat	ie		Cily & State			6. 8	lection Campaign	Financing		\$5.00	May Be
23			28	1			rust Fund Contribu				to Fees
Ζιρ 24	25	Country	Zip 29	30 Cour	itry		This corporation ha Florida Statutes	as liability for	intangible Yes	tax under s	199.032
24	arte many and a second	d Address of Current		[30]			Name and Addres				
GAV	/IRIA, CECILIA				81 Name					····	
	06 SW 51 ST.			<u>-</u>	32 Street A	Address (P.	D. Box Number is I	Not Accepte	hie)		
MIA	MI FL			Ĺ		riciaross (r.c	S. BOX HAMBON IS I			1	
]	B3						
				\ -						85 Z ₁ p	Code
				[.	84 City					100 412	
44 Purcupul	to the presidence	of Spaliane 607 0502	nort 607 1608 Florida Stat			corporation	eubmits this state	ment for the	FL	. `	
	to the provisions reg stered agent ant familiar with, a	s of Sections 607,0502 or both, in the State c and accept the obligat	and 607.1508, Florida Stat of Florida. Such change wa tions of, Section 607.0505,			corporation poration's bo	submits this stater pard of directors. I	ment for the hereby acce		. `	
SIGNATURE.		rinted name of regist, red agov	and the if applicable (N	utes, the abs authorized Florida Statu	ove-named by the corp tes.	required when re	einstaling)		purpose o pt the app DATE	f changing is sointment as	ts registered registered
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14. I do hereby certify that the information supplied with the 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 supplier 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 of the reserver 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 poin attachment with an address.

SIGNATURE

Type of Norte) MAR OF SIGNING OFFICER ON DIRECTOR SAVIRIA - 1/17/97 954-9

0163551