


**2004 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Feb 16, 2004 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # M05919</b>	
1. Entity Name <b>C. PACIFIC INC.</b>	

Principal Place of Business <b>1550 N.W. 17 AVE. MIAMI, FL 33125-2325</b>	Mailing Address <b>830 HOLLYBROOK DRIVE #58-108 HOLLYWOOD, FL 33025-4000</b>
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02092004 No Chg-P CR2E034 (10/03)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number <b>59-2449877</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	

6. Name and Address of Current Registered Agent  <b>GAVIRIA, CECILIA 830 SOUTH HOLLYBROOK DRIVE #58-108 PEMBROKE PINES, FL 33025</b>
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**DO NOT WRITE  
IN THIS SPACE**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐ **\$5.00 May Be  
Added to Fees**

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY- ST- ZIP	PD BERNAL, RICARDO A. 830 SOUTH HOLLYBROOK DRIVE #58-108 PEMBROKE PINES, FL 330254000
TITLE NAME STREET ADDRESS CITY- ST- ZIP	VD GAVIRIA, CECILIA 830 SOUTH HOLLYBROOK DRIVE #58-108 PEMBROKE PINES, FL 330254000
TITLE NAME STREET ADDRESS CITY- ST- ZIP	SD UMBARILA, MARTA 830 SOUTH HOLLYBROOK DRIVE #58-108 PEMBROKE PINES, FL 330254000
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02/16/04-80081-024 150.00

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Cecilia Gaviria - CECILIA ROSARIO GAVIRIA  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #