

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Jul 08, 2002 8:00 am**  
**Secretary of State**

07-08-2002 90231 028 \*\*\*558.75



DO NOT WRITE IN THIS SPACE

**DOCUMENT # P01000006760**

**1. Entity Name**  
**PACIFIC MARINE HARVESTER OF FLORIDA INC**

**Principal Place of Business**  
**3035 NE 208TH STREET**  
**AVENTURA FL 33180-3625**

**Mailing Address**  
**3035 NE 208TH STREET**  
**AVENTURA FL 33180-3625**

**2. Principal Place of Business**

**3. Mailing Address**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

**4. FEI Number**

65-1074589

Applied For

Not Applicable

**5. Certificate of Status Desired** ☐

**\$8.75 Additional Fee Required**

**6. Name and Address of Current Registered Agent**

**7. Name and Address of New Registered Agent**

**CEJAS, PABLO P**  
**9730 SW 5TH STREET**  
**MIAMI FL 33174**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

**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

**9. This corporation is eligible to satisfy its intangible Tax filing requirement and elects to do so.**  
 (See criteria on back) ☐

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2002 Fee will be \$550.00**  
**Make Check Payable to Department of State**

**10. Election Campaign Financing Trust Fund Contribution.** ☐

**\$5.00 May Be Added to Fees**

**11. OFFICERS AND DIRECTORS**

**12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11**

**TITLE** **D** ☐ Delete  
**NAME** **STEAD, ANA I**  
**STREET ADDRESS** **3035 NE 208TH STREET**  
**CITY-ST-ZIP** **AVENTURA FL 33180-3625**

**TITLE** ☐ Change ☐ Addition  
**NAME**  
**STREET ADDRESS**  
**CITY-ST-ZIP**

**TITLE** ☐ Delete  
**NAME**  
**STREET ADDRESS**  
**CITY-ST-ZIP**

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**CITY-ST-ZIP**

**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.**

**SIGNATURE:**

*ANA I STEAD*  
**SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR**

6-12-02

Date

305-937-0427

Daytime Phone #

CR2E034 (9/01)

*Attached*  
# P01000006760  
119316



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State

June 24, 2002

PACIFIC MARINE HARVESTER OF FLORIDA INC  
3035 NE 208TH STREET  
AVENTURA, FL 33180-3625

SUBJECT: PACIFIC MARINE HARVESTER OF FLORIDA INC - 2002 FIRST  
NOTICE UBR  
Ref. Number: P01000006760

We have received your document for PACIFIC MARINE HARVESTER OF  
FLORIDA INC - 2002 FIRST NOTICE UBR and check(s) totaling \$150.00.  
However, your check(s) and document are being returned for the following:

We are unable to waive or reduce the late fee. The corporation received the  
corporate annual report/uniform business report and notice that failure to file the  
report by May 1 would result in a \$400.00 late fee.

The fee to file the profit annual report/uniform business report is \$150.00 plus  
\$400.00 late fee for a total of \$550.00. If a certificate of status is desired, please  
add an additional \$8.75.

If you have any questions concerning the filing of your document, please call  
(850) 245-6059.

Kathy Ashton  
Document Specialist

Letter Number: 402A00040537

*PLEASE SEND ME THE CERTIFICATE OF STATUS  
THANK YOU VERY MUCH*