

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P05000003686

1. Entity Name  
PACIFIC SEAFOOD CORPORATION



FILED

06 AUG -4 AM 9:26

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



08032006 Chg-P CR2E034 (11/05)

Principal Place of Business

2050 NW 95 AVENUE  
MIAMI, FL 33172

Mailing Address

2050 NW 95 AVENUE  
MIAMI, FL 33172

2. Principal Place of Business

9884 NW 123 ST

Suite, Apt. #, etc.

3. Mailing Address

9884 NW 123 ST.

Suite, Apt. #, etc.

City & State

Hialeah Gardens

City & State

FL 33018

Zip

33018

Country

USA

Zip

33018

Country

USA

4. FEI Number

☒ Applied For  
☐ Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

RAFULS, DRINA  
8185 NW 187TH TERRACE  
MIAMI LAKES, FL 33015

Address Change  
Only

7. Name and Address of New Registered Agent

Name

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

9884 NW 123 ST.

City

Hialeah Gardens

FL

Zip Code

33018

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

*Drina Rafuls*

Signature typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reissuing)

DATE

**FILE NOW!!! FEE IS \$150.00**  
**Due by September 6, 2006**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

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

In accordance with s. 607.193(2)(b), F.S., the  
corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE PD  
NAME ESCUDERO, MARIO  
STREET ADDRESS 2050 NW 95 AVENUE  
CITY-ST-ZIP MIAMI, FL 33172 ☐ Delete  
address Change  
Only

TITLE VD  
NAME RAFULS, DRINA  
STREET ADDRESS 2050 NW 95 AVENUE  
CITY-ST-ZIP MIAMI, FL 33172 ☐ Delete  
address Change  
Only

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME 9884 NW 123 ST. ☒ Change ☐ Addition  
STREET ADDRESS Hialeah Gardens, FL 33018  
CITY-ST-ZIP

TITLE NAME 9884 NW 123 ST. ☒ Change ☐ Addition  
STREET ADDRESS Hialeah Gardens, FL 33018  
CITY-ST-ZIP

TITLE NAME  
STREET ADDRESS 900078885319  
CITY-ST-ZIP 08/18/06--01045--014 \*\*150.00

TITLE NAME  
STREET ADDRESS ☐ Change ☐ Addition

TITLE NAME  
STREET ADDRESS ☐ Change ☐ Addition

TITLE NAME  
STREET ADDRESS ☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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:

*Drina Rafuls*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

K. Eckel AUG 07 2006