FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT

1996

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

3-12-96 6-2139-c

DOCUMENT # **P10441** (4)

1. Corporation Name

PACIFIC BROKERAGE SERVICES, INC.

Principal Place of Business	Mailing Address
5757 WILSHIRE BLVD. SUITE 3 LOS ANGELES CA 90036	5757 WILSHIRE BLVD. SUITE 3 LOS ANGELES CA 90036

3. Date Incorporated or Qualified: **06/13/1986**

3a. Date of Last Report: **02/06/1995**

2. Principal Place of Business (21) Suite, Apt. #, etc. (22) City & State (23) Zip (24) Country (25)

2a. Mailing Address (26) Suite, Apt. #, etc. (27) City & State (28) Zip (29) Country (30)

4. FEI Number: **95-3037699** ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

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

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☑ No

9. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324

10. Name and Address of New Registered Agent

81 Name

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

83

84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE (Signature required only when name of registered agent is changed. NOTE: Registered Agent's signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PDT	☐ DELETE	1.1 TITLE	☐ Change ☐ Addition
NAME	WALLACE, STEVEN		1.2 NAME	
STREET ADDRESS	5757 WILSHIRE BLVD., S-3		1.3 STREET ADDRESS	
CITY-ST-ZIP	LOS ANGELES CA		1.4 CITY-ST-ZIP	
TITLE	VP	☐ DELETE	2.1 TITLE	☐ Change ☐ Addition
NAME	WALLACE, JASON J.		2.2 NAME	
STREET ADDRESS	401 N. MAPLE DRIVE		2.3 STREET ADDRESS	
CITY-ST-ZIP	BEVERLY HILLS CA		2.4 CITY-ST-ZIP	
TITLE	V	☐ DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME	PETRUCCI, ROBERT		3.2 NAME	
STREET ADDRESS	110 WALL ST./14TH FLR.		3.3 STREET ADDRESS	
CITY-ST-ZIP	NEW YORK, NY.		3.4 CITY-ST-ZIP	
TITLE	VD	☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME	TOLENDINI, ARTHUR A		4.2 NAME	
STREET ADDRESS	5757 WILSHIRE BLVD. S-3		4.3 STREET ADDRESS	
CITY-ST-ZIP	LOS ANGELES CA		4.4 CITY-ST-ZIP	
TITLE	V	☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME	VALLEJO, CHARLEEN		5.2 NAME	
STREET ADDRESS	5757 WILSHIRE BLVD S3		5.3 STREET ADDRESS	
CITY-ST-ZIP	LOS ANGELES CA		5.4 CITY-ST-ZIP	
TITLE	V	☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME	KRUGER, JAMES R		6.2 NAME	
STREET ADDRESS	5757 WILSHIRE BLVD S3		6.3 STREET ADDRESS	
CITY-ST-ZIP	LOS ANGELES CA		6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental 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 or the receiver 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 on an attachment with an address.

SIGNATURE: STEVEN WALLACE Steven Wallace, President 3/4/96 310 273-0407

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E034 (12/95)