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May 16 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997

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

DOCUMENT # **P11105** **(4)**

1. Corporation Name
SWIRE PACIFIC HOLDINGS INC.

Principal Place of Business	Mailing Address
875 SOUTH WEST TEMPLE SALT LAKE CITY UT 84101	875 SOUTH WEST TEMPLE SALT LAKE CITY UT 84101-2927

3. Date Incorporated or Qualified: 06/13/1986	3a. Date of Last Report: 04/02/1996
4. FEI Number: 87-0424812	☐ 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	

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc.: 22	Suite, Apt. #, etc.: 27
City & State: 23	City & State: 28
Zip: 24 Country: 25	Zip: 29 Country: 30

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 _____ (NOTE: Registered Agent's signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD ☐ DELETE	1.1 TITLE	☐ Change ☐ Addition
NAME	CONYBEARE, H. J.	1.2 NAME	
STREET ADDRESS	SWIRE HOUSE	1.3 STREET ADDRESS	
CITY-ST-ZIP	HONG KONG	1.4 CITY-ST-ZIP	
TITLE	VD ☐ DELETE	2.1 TITLE	☐ Change ☐ Addition
NAME	PELO, T.	2.2 NAME	
STREET ADDRESS	875 S.W. TEMPLE	2.3 STREET ADDRESS	
CITY-ST-ZIP	SALT LAKE CITY UT	2.4 CITY-ST-ZIP	
TITLE	D ☐ DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME	DIXON, P.W.	3.2 NAME	
STREET ADDRESS	SWIRE HOUSE	3.3 STREET ADDRESS	
CITY-ST-ZIP	HONG KONG	3.4 CITY-ST-ZIP	
TITLE	S ☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME	ELKINS, L.A.	4.2 NAME	
STREET ADDRESS	875 S.W. TEMPLE	4.3 STREET ADDRESS	
CITY-ST-ZIP	SALT LAKE CITY UT	4.4 CITY-ST-ZIP	
TITLE	S ☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME	YU, MARGARET (ASST.)	5.2 NAME	
STREET ADDRESS	SWIRE HOUSE	5.3 STREET ADDRESS	
CITY-ST-ZIP	HONG KONG	5.4 CITY-ST-ZIP	
TITLE	ASST SEC. ☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME	G.E. TOLAND	6.2 NAME	
STREET ADDRESS	501 BRICKELL KEY DR.	6.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI, FL. 33131	6.4 CITY-ST-ZIP	

CR2E034 (9/96)

14. I do 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 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: A.S. Shum 5/8/97

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