

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.
AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

0111589

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **P11105**

(4)

1. Corporation Name

SWIRE PACIFIC HOLDINGS INC.



Principal Place of Business

**875 SOUTH WEST TEMPLE
SALT LAKE CITY UT 84101**

Mailing Address

**875 SOUTH WEST TEMPLE
SALT LAKE CITY UT 84101**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

08/13/1986

2. Principal Place of Business

21 12634 S. 265 W.

2a. Mailing Address

26 12634 S. 265 W.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 City & State

27 City & State

23 Draper, Utah

28 Draper, Utah

Zip

Country

Zip

Country

24 84020

25 U.S.A.

29 84020

30 U.S.A.

4. FEI Number

87-0424812

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be Added to Fees

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.

☐

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE **PD** ☐ DELETE
NAME **CONYBEARE, H. J.**
STREET ADDRESS **SWIRE HOUSE**
CITY-ST-ZIP **HONG KONG**

TITLE **VD** ☐ DELETE
NAME **PELO, T.**
STREET ADDRESS **875 S.W. TEMPLE**
CITY-ST-ZIP **SALT LAKE CITY UT**

TITLE **D** ☒ DELETE
NAME **DIXON, P.W.**
STREET ADDRESS **SWIRE HOUSE**
CITY-ST-ZIP **HONG KONG**

TITLE **S** ☐ DELETE
NAME **ELKINS, L.A.**
STREET ADDRESS **875 S.W. TEMPLE**
CITY-ST-ZIP **SALT LAKE CITY UT**

TITLE **S** ☐ DELETE
NAME **YU, MARGARET (ASST.)**
STREET ADDRESS **SWIRE HOUSE**
CITY-ST-ZIP **HONG KONG**

TITLE **AS** ☐ DELETE
NAME **TOLAND, G E**
STREET ADDRESS **501 BRICKELL KEY DR**
CITY-ST-ZIP **MIAMI FL**

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE ☒ Change ☐ Addition
2.2 NAME **J. E. Pelo**
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. 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 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 807, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

[Signature]

7/9/94

801/816-5200

CR2E034 (5/98)