FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9300000145 (1)

NEW A	SIA/PACIFIC RIM TRADI	ING CORPORATION			
Principal Plac	e of Business	Mailing Address		·	Fa irl 40 (01 116) 01001 0111 1001
9 SOUTH HERCULES AVE 9 S HERCULES AVE					
CLEARWATER FL SAGSS- CLEARWATER FL SAGSS-					
US		US		DO NOT WRITE IN TH	IS SPACE
				3. Date Incorporated or Qualified	
- 5				12/28/1992	
	Place of Business	2a. Mailing Address		4. FEI Number	Applied For
Suite, Apt. #, etc.		Suite, Apt. #, etc.		59-3154591	Not Applicable \$8.75 Additional
22		27		Certificate of Status Desired	Fee Required
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid the	
24 337	(5 25		60	Personal Property Tax due June 30.	Yes 🔀 No
	g. Name and Address of C	urrent Registered Agent		10. Name and Address of New Registers	ed Agent
į LAI	NT Z , PHILLIP		81 Name		
9 S. HERCULES AVE			82 Street Add	dress (P.O. Box Number is Not Acceptable)	
j CL	EARWATER FL 34825?				
			83		
			84 City		. 85 Zip Code
					L 85 33765
11. Pursuant office or r	to the provisions of Sections 60: registered agent, or both, in the	7.0502 and 607.1508, Florida Statutes State of Florida, Such change was au	the above-named cor	poration submits this statement for the purpose ation's board of directors. I hereby accept the a	of changing its registered
agent. I a	im familiar with, and agcent the	obligations of, Section 607.0505, Flori	da Statutes.		•
SIGNATURE	Olyler Whork	PHILL, PLANTZ pre			4/98
40		red agent and the trappicable (NOTE:	Registered Agent signature requ		UD DIDECTODO IVI 40
12.	PD	S AND DIRECTORS DELETE	13.	ADDITIONS/CHANGES TO OFFICERS A	Change Addition
NAME	LANTZ, PHILLIP	_ officer	1.2 NAME		
STREET ADDRESS	9 S. HERCULES AVE		1.3 STREET ADDRESS		
}	CLEARWATER FL				
CITY-ST-ZIP TITLE	D	DELETE	1.4 CITY - ST - ZIP 2.1 TITLE		Change Addition
NAME	LANTZ, MITUSUKO		2.2 NAME		
STREET ADDRESS	9 S. HERCULES AVE		2.3 STREET ADDRESS		
CITY-ST-ZIP	CLEARWATER FL		2. 4 City-St-ZiP		
TITLE		DELETE	3.1 TITLE		Change Addition
NAME			3.2 NAME		· ·
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3 4. CiTY - ST - ZiP		
TITLE		DELETE	41 TITLE		☐ Change ☐ Addition
NAME			4 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY - ST - ZIP		
TITLE	<u> </u>	DELETE	5.1 TITLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY - ST - ZIP		
TITLE		DELETE	6.1 TITLE		Change Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

FILED

May 01 1998 8:00am

Secretary of State