Apr 20, 1999 8:00 am Secretary of State

04-20-1999 90253 043 \*\*\*150.00

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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P9300000145

1. Corporation Name NEW ASIA/PACIFIC RIM TRADING CORPORATION						4 10011001 120 10200 11441 <b>00</b> 411 <b>83</b> 114	: <b>08</b> i): <b>88</b> ii: <b>9</b> i	ioi <b>ario</b> i mani	D/88# 8#N #88#
•									1
Principal Place	e of Business	Mailing Address				-		())   <b>        </b>	DIREL Ditt INEt
9 SOUTH HERCULES AVE 9 S HERCULES AVE									
CLEARWATER FL 33765 CLEARWATER FL 33765						TO MOTIVIPITE IN THIS OPPOS			
US US						DO NOT WRITE IN THIS SPACE			
!						3. Date incorporated or Qualifed 12/28/1992			
2. Principal Pl	lace of Business	2a. Mailing Address				4. FEI Number			plied For
21		26				59-3154591			t Applicable
Suite, Apt. #, etc.						5. Certifcate of Status Desired		<b>\$8.75</b> A Fee Re	
22 27 City & State									<del></del>
City & State	e ·	<b>⊢</b> '	City & State			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees			
Zip	Country	_ 28   Zip	Countr	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~		This corporation owes the curre	nt vear Inta	_	
24	25 29			,		Personal Property Tax.			
24]	9. Name and Address of Current		<u> </u>			10. Name and Address of New Re	gistered A	gent	
			8	1 Nar	ne				}
LANTZ, PHILLIP			-	82 Street Address (P.O. Box Number is Not Acceptable					
9 S. HERCULES AVE			["	2 300	et Addie	iss (F.O. Box Hamber to Not 7 toophal			
CLEARWATER FL 34625			8	3			<del></del>		
•			_	4 64			_	85 Zip C	Code
,			. 84 City				FL	2 P	
office or n agent. I a	to the provisions of Sections 607.0502 egistered agent, or both, in the State or familiar with, and accept the obligations of the state of registered agent of the state of th	ons of, Section 607.0505, Florid and title if applicable. (NOTE: R	nonzed b la Statute legistered Ag	y the co	rporatioi	when reinstating)	DATE DATE	unen as re	ylstered
12.	OFFICERS AND	D DIRECTORS  DELETE	13.			ADDITIONS/CHANGES TO OFF	ICERS AN	Change	Addition
TITLE	1.0			1.1 TITLE				onunge	
NAME	LANTZ, PHILLIP     9 S. HERCULES AVE		1.2 NAME						1
STREET ADDRESS			1.3 STREET ADDRESS		SS				
CTY-ST-ZIP	CLEARWATER FL DELETE		1.4 CITY-ST-ZIP		+-			Change	Addition
TITLE			2.1 MILE 2.2 NAME						
NAME	LANTZ, MITUSUKO   9 S. HERCULES AVE			: Et addri					ł
STREET ADORESS	CLEARWATER FL				.55	•			(
CITY-ST-ZIP	DELETE		2.4 CITY-ST-ZIP 3.1 TITLE		+-			Change	Addition
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STREET ADDRESS CITY-ST-ZIP	·		3.4. CITY			• •			
TITLE	DELETE		4.1 TITLE		$\top$			☐ Change	☐ Addition
NAME			4.2 NAM		1				}
STREET ADDRESS				ET ADDRI	:SS			•	1
CITY-ST-ZIP	•		4.4 CITY-	ST-ZIP					
TITLE			-	5.1 TITLE				Change	☐ Addition }
NAME			5.2 NAME	E					}
STREET ADDRESS	no,		5.3 STRE	ET ADDRI	ss				Ì
CITY-ST-ZIP				ST-ZIP					
TITLE	☐ DELETE				-			Change	☐ Addition
NAME .			6.2 NAME				•		
STREET ADDRESS	<b>}</b> .		6.3 STRE	ET ADDRI	SS				i i

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, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE

SIGNATURE AND TYPED ON PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-16-99

727-446-7422

Daytime Phone #