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

FILED Apr 20, 1999 8:00 am Secretary of State

04-20-1999 90288 044 ***150.00

Corporation Name	P930000	03156
SOUTHERN PACIFIC	INTERNATIONAL	CORPORATION

Principal Place of Business	Mailing Address			
11931 SW 55TH ST. COOPER CITY FL 33330 US	11931 SW 55TH ST. COOPER CITY FL 33330 US			
2. Principal Place of Business	2a. Mailing Address 26			
Suite, Apt. #, etc.	Suite, Apt. #, etc.			
22	City & State			
_	27			

3. Date Incorporated or Qualifed 01/19/1993 4. FEI Number Applied For 65-0383432 Not Applicable \$8.75 Additional 5. Certificate of Status Desired

DO NOT WRITE IN THIS SPACE

Fee Required \$5.00 May Be-≤ 6. Election Campaign Financing --Added to Fees Trust Fund Contribution

8. This corporation owes the current year Intangible □No Personal Property Tax. ☐ Yes 10. Name and Address of New Registered Agent

	81	Name	
11931 SW 551H SI.	82	Street Address (P.O. Box Number is Not Acceptable)	
COOPER CITY FL 33330	83		
·	84	City FL 85 Zip Code	
Pursuant to the provisions of Sections 607 0502 and 607 1508. Florida Statutes, the at	DOVE	-named corporation submits this statement for the purpose of changing its registe	red

Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement of the provisions of Sections 607.0502 and 607.1508, Florida Statutes to florida Statutes. I hereby accept the appointment as registered agent, I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

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SIGNATURE	Signature, typed or printed name of registered agent and title if applicable	(NOTE: De	gistered Agent signature requ	ired when reinstating)	DATE	
	OFFICERS AND DIRECTORS	<u></u>	13.	ADDITIONS/CHANGES TO OFFIC		RS IN 12
12.	P OPPICERS AND DIRECTORS	DELETE	1.1 TITLE	ADDITIONS/CITATIOES TO CITTO	☐ Change	Addition
TITLE	· - - - - - - - - -	OLCETE				_
NAME	HSU, DAVID		1.2 NAME			
STREET ADDRESS	11931 SW 55TH ST.		1.3 STREET ADDRESS			ļ
CITY-ST-ZIP	COOPER CITY FL 33330		1.4 CITY-ST-ZIP	······································		
TITLE	, ·	DELETE	2.1 TITLE		Change	☐ Addition
NAME	SHU, DAISY Y		2.2 NAME			
STREET ADDRESS	11931 S W 55 STREET		2.3 STREET ADDRESS			
-CITY-ST-ZIP-	_MIAMI_FL_33330	<u> </u>	2. 4 CITY+ST-ZIP			
TITLE	S	☐ DELETE	3.1 TITLE	· · · · · · · · · · · · · · · · · · ·	☐ Change	Addition
NAME	HSU, JAMES		3.2 NAME			
STREET ADDRESS	11931 SW 55TH ST.		3.3 STREET ADDRESS			
CITY-ST-ZIP	COOPER CITY FL 33330		3.4. CITY-ST-ZIP			
TITLE		DELETE	4.1 TITLE		☐ Change	Addition
NAME	,		4, 2 NAME			}
STREET ADDRESS	·		4.3 STREET ADDRESS			
CITY-ST-ZIP	<u> </u>		4.4 CITY+ST-ZIP			
TITLE		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 TITLÉ		☐ Change	☐ Addition
NAME			6.2 NAME			j
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, with all other like empowered.

SIGNATURE: