

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

03 MAY -1 PM 4:50

TALLAHASSEE, FLORIDA

100001497971
-05/24/95 -01040 -012
****200.00 ****200.00

DO NOT WRITE IN THIS SPACE

DOCUMENT # P93000019286 (2)

1. Corporation Name
Pacheco's Deliveries, Inc

Principal Place of Business Mailing Address
4855 S.W 93rd ct 4855 S.W 93rd ct
Miami, FL 33165 Miami, FL 33165

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

3. Date Incorporated or Qualified	3a. Date of Last Report
03/15/1993	
FBI Number	Applied For
65-0393696	Not Applicable
5. Certificate of Status Desired	\$8.75 Additional Fee Required
<input type="checkbox"/>	
6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
<input type="checkbox"/>	
8. The corporation has liability for intangible tax under S. 199.032, Florida Statutes	
<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
Pacheco, Felix 4855 S.W 93rd ct Miami, FL 33165				81	Name		
				82	Street Address (P.O. Box Number is Not Acceptable)		
				83			
				84	City	85	Zip Code
				FL			

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) _____ DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PRESIDENT	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	FELIX PACHECO	1.2 NAME	
STREET ADDRESS	4855 S.W. 93RD CT.	1.3 STREET ADDRESS	
CITY, ST, ZIP	MIAMI, FL. 33165	1.4 CITY, ST, ZIP	
TITLE	VICE - PRESIDENT	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ELODIO PACHECO	2.2 NAME	
STREET ADDRESS	1040 S.W 70th Ave B. 247	2.3 STREET ADDRESS	
CITY, ST, ZIP	MIAMI FL.	2.4 CITY, ST, ZIP	
TITLE	SECRETARY/TREASURER	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ELOISA PACHECO	3.2 NAME	
STREET ADDRESS	4855 S.W. 93RD CT.	3.3 STREET ADDRESS	
CITY, ST, ZIP	MIAMI, FL. 33165	3.4 CITY, ST, ZIP	
TITLE	VICE - SECRETARY	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	JAVIER ARTOLA	4.2 NAME	
STREET ADDRESS	1470 N.W 3rd St.	4.3 STREET ADDRESS	
CITY, ST, ZIP	MIAMI, FL. 33135	4.4 CITY, ST, ZIP	
TITLE		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY, ST, ZIP		5.4 CITY, ST, ZIP	
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY, ST, ZIP		6.4 CITY, ST, ZIP	

RECEIVED BY MAY 1

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(h), 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: Felix Pacheco 4-11-95 352-5747
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date (Include State)