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 # P94000014394

ASIAN PACIF	IC DEVELOPMENT	CORPORATION				
Principal Place of Bu	usiness	Mailing Address	_			1 10511501 110 1011 01011 00131 06111 05101 11011 013
2100 N.E. 55TH STREET FORT LAUDERDALE FL 33308		2100 N.E. 55TH STREET FORT LAUDERDALE FL 33308				
						DO NOT WRITE IN THIS SPAC
I						3. Date Incorporated or Qualifed
						02/21/1994
2. Principal Place of	Business	2a. Mailing Address			•	4. FEI Number
21		26				65-0467283
Suite, Apt. #, etc.		Suite, Apt. #, etc.				5. Certifcate of Status Desired F
City & State		City & State			-	6. Election Campaign Financing Trust Fund Contribution
Zip 24	Country 25	Zip 29	Country	у		8. This corporation owes the current year Intangible Personal Property Tax.
·	Name and Address of Cu		1301			10. Name and Address of New Registered Agent
			81	1	Name	(b. Name and Address of their registered Agent
	on, george a Theast third avenu	E	82	2	Street Addr	ress (P.O. Box Number is Not Acceptable)
FORT LAU	DERDALE FL 33316		83	3		
			84	4	City	FL 85
office or register	ed agent, or both, in the S	.0502 and 607.1508, Florida Statate of Florida. Such change wa oligations of, Section 607.0505,	s authorized by	v th	ne corporatio	oration submits this statement for the purpose of changion's board of directors. I hereby accept the appointment
SIGNATURE						
	e, typed or printed name of registere		OTE: Registered Age	ent s	ignature require	
12	OFFICERS	S AND DIRECTORS	12			ADDITIONS/CHANCES TO DESIGNED AND DID

FILED Feb 18, 1999 8:00am **Secretary of State**

02-18-1999 90081 042 ***150.00

DO	NOT	WRITE	IN THIS	SPACE	

Applied For Not Applicable \$8.75 Additional

Fee Required \$5.00 May Be

Added to Fees

X Yes

□No

	-			1				
FOR	T LAUDERDALE FL 33316		83					
			84	City		· FL	85 Zip	Code
44 Durewant	to the provisions of Sections 607.0502 and 607.15	OR Elorida Statutas	the abou	l named	l corneration automite this etc		<u>- </u>	
office or r	registered agent, or both, in the State of Florida. So im familiar with, and accept the obligations of, Sec	uch change was aut	horized by	the corp	poration's board of directors.	I hereby accept the appo	intment as r	egistered
SIGNATURE	Signature, typed or printed name of registered agent and title if applic							
12.	OFFICERS AND DIRECTO	· · · · · · · · · · · · · · · · · · ·	13.	nt signature	required when reinstating)	DATE ANGES TO OFFICERS AN	ID DIDECT	ODC IN 12
TITLE	D	□ DELETE	1.1 TITLE		ADDITIONS/CHA	INGES TO OFFICERS AF	Change	
NAME	BECKER, ALAN S		1.2 NAME					
STREET ADDRESS	3111 STIRLING ROAD			* 40000000				
i	FORT LAUDERDALE FL 33312			T address				
CITY-ST-ZIP TITLE	D D	☐ DELETE	1.4 CITY-S 2.1 TITLE	T-ZIP	· · · · · · · · · · · · · · · · · · ·		☐ Change	☐ Addition
NAME	•						Citalige	
	CASEY, STANLEY		2.2 NAME					
STREET ADDRESS	1270 AVE. OF THE AMERICAS #291			TADDRESS	·	عراب والمسا	_	->
CITY-ST-ZIP	NEW YORK NY 10020	□ DELETE	2. 4 CITY-5	ST-ZIP		•		
TITLE	D	☐ DEFE IE	3.1 TITLE				☐ Change	Addition
NAME	MARLIN, WILLIAM M		3.2 NAME					
STREET ADDRESS	1952 KIRKBRIDGE CIRCLE		3.3 STREE	TADDRESS				
CITY-ST-ZIP	YARDLEY PA 19067		3.4. CITY-5	ST-ZIP				
TITLE	D	☐ DELETE	4.1 TITLE				Change	☐ Addition
VAME	NYE, T. AVERY JR		4.2 NAME					
STREET ADDRESS	1291 GLENCREST DR.		4.3 STREE	ADDRESS				
CITY-ST-ZIP	HEATHROW FL 32746		4.4 CITY-S	T-ZIP				
TITLE	D	□ DELETE	5.1 TITLE				Change	☐ Addition
NAME	SILVER, RONALD		5.2 NAME			•		
STREET ADDRESS	115 N.W. 167TH ST.		5.3 STREE	ADDRESS		•		
CITY-ST-ZIP	NO. MIAMI BEACH FL 33169		5.4 CITY-S	T-ZIP				
TITLE	D	☐ DELETE	6.1 TITLE				Change	Addition
NAME	CASH, ROBERT O JR.		6.2 NAME					
STREET ADDRESS	2000 S. OCEAN DR. #1202		6.3 STREET	ADDRESS				
CITY-ST-ZIP	FT. LAUDERDALE FL		6.4 CITY-S	T-ZIP	,			
14 I hereby c	ertify that the information supplied with this filing d	oes not qualify for th	e evemnt	on etated	in Section 119 07/3\/i\ Ele	rida Statutos I further con	tifu that the	information

Indicated on this annual report or supplied with rus 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:

954 563-5201