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Jan 29 1997 8:00am

Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # P94000063580 (2)

1. Corporation Name

SOUTH PACIFIC ENTERPRISES OF MIAMI, INC.

Principal Place of Business

12792 SW 45T TERRACE  
MIAMI FL 33175

Mailing Address

12792 SW 45T TERRACE  
MIAMI FL 33175

3. Date Incorporated or Qualified

08/29/1994

3a. Date of Last Report

09/24/1996

4. FEI Number

65-0530183

Applied For

Not Applicable

5. Certificate of Status Desired

☒ \$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

☐ \$5.00 May Be  
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes

☐ Yes ☒ No

2. Principal Place of Business

21 12792 SW 45th Terrace

Suite, Apt. #, etc.

22

City & State

23 Miami, FL

Zip

24 33175

Country

25 USA

2a. Mailing Address

27 12792 SW 45th Terrace

Suite, Apt. #, etc.

28

City & State

28 Miami, FL

Zip

29 33175

Country

30 USA

9. Name and Address of Current Registered Agent

ORTIZ, PAOLO A  
12792 SW 45T TERRACE  
MIAMI FL 33175

10. Name and Address of New Registered Agent

81 Name

Ortiz, Paola A

82 Street Address (P.O. Box Number is Not Acceptable)

12792 S.W. 45th Terrace

83

84 City

Miami

FL

85 Zip Code

33175

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

Paola A. Ortiz / Paola A. Ortiz

1/17/97

Signature, typed or printed name of registered agent and third party (if applicable)

(NOTE: Registered Agent signature required when re-stating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PVST ☐ DELETE

NAME MASIHY, MYRIAM

STREET ADDRESS 11010 S.W. 163RD ST.

CITY-ST-ZIP MIAMI FL 33157

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I do 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.

SIGNATURE:

Myriam Masihy 1/17/97 (305)235-4758

CR2E034 (9/96)