

**SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 8, 1995.
AMOUNT DUE ON OR BEFORE 8/8/95: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375)**

**PROFIT
CORPORATION
ANNUAL REPORT
1995**



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

DOCUMENT # P94000076864 (5)

1. Corporation Name

ATLANTIC PACIFIC INDUSTRIES, INC.

Principal Place of Business

**321 NORTHLAKE BLVD.
SUITE 116
NORTH PALM BEACH FL 33408**

Mailing Address

**321 NORTHLAKE BLVD.
SUITE 116
NORTH PALM BEACH FL 33408**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

10/19/1994

3a. Date of Last Report

4. FEI Number

65-0176160

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**

6. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business

21

2a. Mailing Address

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

23. City & State

28. City & State

24. Zip

Country

29. Zip

Country

9. Name and Address of Current Registered Agent

**CORPORATION SERVICE COMPANY
1201 HAYS ST.
TALLAHASSEE FL 32301**

*delete
see below.*

10. Name and Address of New Registered Agent

**81 Name Margaret L. Anderson
82 Street Address (P.O. Box Number is Not Acceptable) 401 Winston Ave. D-2
83 Lake Wales, FL.
84 City FL 85 Zip Code 33863**

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

Kenneth D. Coleman

NOTE: Registered Agent's signature required when not in person

Margaret L. Anderson

DATE **June 8, 1995**

12. OFFICERS AND DIRECTORS

**1. TITLE D
NAME COLEMAN, KENNETH D
STREET ADDRESS 321 NORTHLAKE BLVD., STE. 116
CITY, ST, ZIP NORTH PALM BEACH FL 33408**

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS (If any)

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 is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(4), 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:

Kenneth D. Coleman

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

6/8/95 407-842-5419

CR2E034 (3/95)