

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

CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **P95000011057**

1. Corporation Name

PACIFICA TRADING CORP.

Principal Place of Business

Mailing Address

2. Principal Place of Business

21 **8404 S.W. 40 STREET**

Suite, Apt. #, etc.

22

City & State

23 **MIAMI, FL**

Zip

24 **33155**

Country

25 **DADE**

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28

Zip

29

Country

30

9. Name and Address of Current Registered Agent

DAGOBERTO VALDES
8404 S.W. 40 STREET
MIAMI, FL 33155

3. Date Incorporated or Qualified

3a. Date of Last Report

4. FID Number

65-0555738

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

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

14. 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 607.0805, Florida Statutes.

SIGNATURE

Dagoberto Valdes

04-01-96

12. OFFICERS AND DIRECTORS

11a. NAME
11b. STREET ADDRESS
11c. CITY-STATE-ZIP

P/T
SERGIO ABARCA
5710 N.W. 74 PL, SUITE 108
COCONUT CREEK, FL 33073

11d. NAME
11e. STREET ADDRESS
11f. CITY-STATE-ZIP

S
SCHERIE JACOVELLI
5710 N.W. 74 PL, SUITE 108
COCONUT CREEK, FL 33073

11g. NAME
11h. STREET ADDRESS
11i. CITY-STATE-ZIP

11j. NAME
11k. STREET ADDRESS
11l. CITY-STATE-ZIP

11m. NAME
11n. STREET ADDRESS
11o. CITY-STATE-ZIP

11p. NAME
11q. STREET ADDRESS
11r. CITY-STATE-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

13a. NAME
13b. STREET ADDRESS
13c. CITY-STATE-ZIP

P/T/S/D
SERGIO ABARCA
5710 N.W. 74 PL, SUITE 108
COCONUT CREEK, FL 33073

13d. NAME
13e. STREET ADDRESS
13f. CITY-STATE-ZIP

13g. NAME
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13n. STREET ADDRESS
13o. CITY-STATE-ZIP

13p. NAME
13q. STREET ADDRESS
13r. CITY-STATE-ZIP

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*****200.00**

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)(b), 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SERGIO A. ABARCA **02-1696-305-553-8080**

4-4-96