

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

FILED
Apr 25 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P95000078359 (3)
 1. Corporation Name
PC INTERNATIONAL TRADING CORP.



Principal Place of Business 5601 CORPORATE WAY SUITE 320 WEST PALM BEACH FL 33407	Mailing Address 5601 CORPORATE WAY SUITE 320 WEST PALM BEACH FL 33407-2043
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3. Date Incorporated or Qualified 10/12/1995	3a. Date of Last Report 05/01/1996
4. FEI Number 65-0618729	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

2. Principal Place of Business 21 2001 A Australian Avenue Suite, Apt. #, etc. 22 City & State 23 Riviera Beach, FL Zip 24 33404 Country 25 PB	2a. Mailing Address 26 2001 A Australian Avenue Suite, Apt. #, etc. 27 City & State 28 Riviera Beach, FL Zip 29 33404 Country 30 PB
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9. Name and Address of Current Registered Agent PETERSON, DARRELL L 5601 CORPORATE WAY SUITE 320 WEST PALM BEACH FL 33407		10. Name and Address of New Registered Agent B1 Name B2 Street Address (P.O. Box Number is Not Acceptable) 2001 A Australian Avenue B3 B4 City Riviera Beach FL B5 Zip Code 33404	
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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: **Darrell Peterson** DATE: **April 21, 1997**

Signature, typed or printed name of registered agent, and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE PD	<input type="checkbox"/> DELETE	1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME PETERSON, DARREN L		1.2 NAME	
STREET ADDRESS 5601 CORPORATE WAY, SUITE 320		1.3 STREET ADDRESS 2001 A Australian Avenue	
CITY-ST-ZIP WEST PALM BEACH FL 33407		1.4 CITY-ST-ZIP Riviera Beach, FL 33404	
TITLE VPD	<input type="checkbox"/> DELETE	2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME SULIVAN, PATRICK T		2.2 NAME	
STREET ADDRESS 5601 CORPORATE WAY, SUITE 320		2.3 STREET ADDRESS 2001 A Australian Avenue	
CITY-ST-ZIP WEST PALM BEACH FL 33407		2.4 CITY-ST-ZIP Riviera Beach, FL 33404	
TITLE VD	<input type="checkbox"/> DELETE	3.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME HERTER, JOHN D		3.2 NAME	
STREET ADDRESS 5601 CORPORATE WAY, SUITE 320		3.3 STREET ADDRESS 2001 A Australian Avenue	
CITY-ST-ZIP WEST PALM BEACH FL 33407		3.4 CITY-ST-ZIP Riviera Beach, FL 33404	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	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	<input type="checkbox"/> DELETE	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	

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: **Darrell Peterson** DATE: **April 21, 1997** (561) 848-1616

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (9/96)