

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 27, 2003 8:00 am
Secretary of State

02-27-2003 90131 019 ***158.75

DOCUMENT # P95000084151

1. Entity Name
PACIFIC RIM TECHNOLOGIES, INC.



Principal Place of Business
2901 W BUSCH BLVD
SUITE 900
TAMPA FL 33618
US

Mailing Address
2901 W BUSCH BLVD
SUITE 900
TAMPA FL 33618
US



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **65-0633353**

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☒ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

PARKER, SARA S
13508 AVISTA DRIVE
TAMPA FL 33624

Name **RICHARD PARKER**
Street Address (P.O. Box Number is Not Acceptable) **13706 ATTLEY PLACE**
City **TAMPA** **FL** **Zip Code** **33624**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

2/24/03
DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing ☐ **\$5.00 May Be Added to Fees**
Trust Fund Contribution.

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **VPD PD** ☐ **Delete**
NAME **PARKER, RICHARD S**
STREET ADDRESS **13508 AVISTA DRIVE**
CITY - ST - ZIP **TAMPA FL 33624**

TITLE ☐ **Change** ☐ **Addition**
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE **PD** ☒ **Delete**
NAME **PARKER, SARA S**
STREET ADDRESS **13508 AVISTA DRIVE**
CITY - ST - ZIP **TAMPA FL 33624**

TITLE ☐ **Change** ☐ **Addition**
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CITY - ST - ZIP

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12. I 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **SIGNATURE REQUIRED RICHARD PARKER**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/24/03 **P13-935-1825**
Date **Daytime Phone #**

CR2E034 (10/02)