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FILED
Apr 06 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # P96000098886 (0)

1. Corporation Name

PCD INTERNATIONAL, INC.



Principal Place of Business

3601 N.E. 207TH STREET
#1215
AVENTURA FL 33180

Mailing Address

3601 N.E. 207TH STREET
#1215
AVENTURA FL 33180

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

12/05/1996

4. FEI Number

NOT APPLICABLE

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☐ No

2. Principal Place of Business

21 343-6 IVES DAIRY RD
Suite, Apt. #, etc.

22

City & State

23 N. MIAMI FL

Zip

24 33179

Country

25 USA

2a. Mailing Address

26 343-6 IVES DAIRY RD
Suite, Apt. #, etc.

27

City & State

28 N. MIAMI FL

Zip

29 33179

Country

30 USA

9. Name and Address of Current Registered Agent

REGA, PETER A
3601 N.E. 207TH STREE
#1215
AVENTURA FL 33180

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

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 PETER A. REGA (P)
Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE P ☐ DELETE

NAME REGA, PETER A
STREET ADDRESS 3601 NE 207TH ST., #1215
CITY-ST-ZIP AVENTURA FL 33180

TITLE V ☒ DELETE

NAME FORTE, CAROLYN T
STREET ADDRESS 13130 CRISTAL D'ARQUES DR
CITY-ST-ZIP PALM BEACH GARDENS FL 33410

TITLE S ☒ DELETE

NAME FORTE, DANIELLE
STREET ADDRESS 3601 NE 207TH ST., #1215
CITY-ST-ZIP AVENTURA FL 33180

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 P ☒ Change ☐ Addition

1.2 NAME REGA, PETER A.
1.3 STREET ADDRESS 343-6 IVES DAIRY RD
1.4 CITY-ST-ZIP N. MIAMI FL 33179

2.1 TITLE V ☐ Change ☒ Addition

2.2 NAME REGA, LISA A.
2.3 STREET ADDRESS 343-6 IVES DAIRY RD
2.4 CITY-ST-ZIP N. MIAMI FL 33179

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 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 PETER A. REGA

3/25/98 2:45 PM

CR2E034 (10/97)