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

CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 1. Corporation Name P97000029125 (6)

PACIFI	C CAPITAL CORPORATION	1		e changai ma taur fabut ahnu banti Céin Blith	1.818 (818) (1886 1188) 8111 (88)
<u> </u>					
Principal Place of Business Mailing Address					(1818 (819) 11819 1189) BILL 1981
1605 MAIN STREET 1605 MAIN STREET					
SUITE 1004 SUITE 1004 SUITE 1004 SARASOTA FL 34236 SARASOTA FL 34236			DO NOT WRITE IN THIS SPACE		
	• • • • • • • • • • • • • • • • • • • •			3. Date Incorporated or Qualified	
				03/28/1997	
	lace of Business	2a. Mailing Address		4. FEI Number 65-0671850	Applied For
Sulte, Apt.	# etc	Suite, Apt. #, etc.			Not Applicable \$8.75 Additional
27		·		5. Certificate of Status Desired	Fee Required
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid the d	
24	25 Name and Address of Curre		90	Personal Property Tax due June 30. 10. Name and Address of New Registere	Yes No
IOUNGON DAVID DECO 81 Name				/ \	o Agent
2201 RINGLING BLVD.			92 Street Addition	odd Mayo	
SUITE 104			82 Street Addr	ress (P.O. Box Number is Not Acceptable)	004
SARASOTA FL 34237					
			84 City o		. 85 Zip Code
			'	arasota F	L 74236
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 familia with, and accept the obligations of, Section 607.0505, Florida Statutes.					
agent. I am familie with, and accept the obligations of, Section 607.0505, Florida Statutes.					
SIGNATURE Todd May 0 Pristant (NOTE: Registered Agent signature of redistance agent and title if applicable (NOTE: Registered Agent signature of				1-4-	48
12.		ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTORS IN 12
TITLE	D	☐ DELETE	1.1 TITLE	, S, T	☐ Change ☐ Addition
NAME	MAYO, TODD L		1.2 NAME		
STREET ADORESS	1605 MAIN STREET		1.3 STREET ADDRESS		
CITY-ST-ZIP TITLE	SARASOTA FL 34236	☐ DELETÉ	1.4 CITY-ST-ZIP		Change Addition
NAME		_ otter	2.2 NAME		
STREET ADORESS			2.3 STREET ADDRESS		
CITY-ST-2IP			2.4 CITY-ST-ZIP		
TITLE		☐ DELET E	3.1 TITLE		☐ Change ☐ Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP TITLE		DELETE	3.4. CITY - ST - ZIP 4.1 TITLE	· · · · · · · · · · · · · · · · · · ·	Change Addition
NAME		□ better	4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE		DELETE	5.1 TITLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP TITLE		DELETE	5.4 CITY - ST - ZIP		Change Addition
NAME		F) prest	6.1 TITLE 6.2 NAME		
STREET ADORESS			6.3 STREET ADDRESS		
THICK ADDITION			S.S. GAIRET ADDITION		

14. I hereby certify that the information supplied with this filing does not possible on this annual report or supplied with this filing does not possible on this annual report or supplied with this filing does not possible on this annual report or supplied with this filing does not possible on this annual report or supplied with this filing does not possible on this annual report or supplied with the information indicated on this annual report or supplied with the information indicated on this annual report or supplied with the information indicated on this annual report or supplied with the information supplied with the information indicated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplied with the information supplied with supplied with the information supplied with supplied with suppl

FILED

Feb 03 1998 8:00am

Secretary of State