2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P98000040896

Entity Name: PAC RIM PRODUCTS, INC.

FILED Jan 19, 2002 8:00 AM Secretary of State

Current Principal Place of Business: New Principal Place of Business:

705 B LIVE OAK ST. 705 C LIVE OAK ST.

TARPON SPRINGS, FL 34689 TARPON SPRINGS, FL 34689

Current Mailing Address: New Mailing Address:

705 B LIVE OAK ST. 705 C LIVE OAK ST.

TARPON SPRINGS, FL 34689 TARPON SPRINGS, FL 34689

FEI Number: 59-3517518 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

LAMBORN, USANEE LAMBORN, WILLIAM E PRES 705 B LIVE OAK ST. 705 C LIVE OAK ST.

TARPON SPRINGS, FL 34689 US TARPON SPRINGS, FL 34689 US

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.

SIGNATURE: WILLIAM E. LAMBORN 01/19/2002

Electronic Signature of Registered Agent Date

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X). Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: PRES (X) Change () Addition

 Name:
 LAMBORN, USANEE
 Name:
 LAMBORN, WILLIAM E

 Address:
 3209 HOLIDAY LAKE DRIVE
 Address:
 705 C LIVE OAK ST

City-St-Zip: HOLIDAY, FL 34691 City-St-Zip: TARPON SPRINGS, FL 34689 US

Title: VP () Delete Title: SEC (X) Change () Addition Name: LAMBORN, WILLIAM Name: HAZELBAKER, SUZANNE U

Name: LAMBORN, WILLIAM Name: HAZELBAKER, SUZANNE C Address: 3209 HOLIDAY LAKE DRIVE Address: 705 C LIVE OAK ST

City-St-Zip: HOLIDAY, FL 34691 City-St-Zip: TARPON SPRINGS, FL 34689 US

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: WILLIAM E. LAMBORN PRES 01/19/2002