

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999.
 AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE
 Katherine Harris
 Secretary of State
 DIVISION OF CORPORATIONS

FILED
 SECRETARY OF STATE
 DIVISION OF CORPORATIONS

99 NOV 15 AM 11:24

DOCUMENT # 998000048471

1. Corporation Name

Pacific Direct International Company

Principal Place of Business

Mailing Address

2905 Lakeview Drive
 Fern Park, FL 32730

2905 Lakeview Drive
 Fern Park, FL 32730

REINSTATEMENT 99

DO NOT WRITE IN THIS SPACE

| | | | | | | | |
|----|--|----|---|----|---|------------------------------|--|
| 21 | 2. Principal Place of Business 2905 Lakeview Drive Suite, Apt. #, etc. | 26 | 2a. Mailing Address 2905 Lakeview Drive Suite, Apt. #, etc. | 4. | FEI Number 59-3514552 | Applied For | Not Applicable |
| 22 | 22. City & State Fern Park, FL 32730 | 27 | 27. City & State Fern Park, Florida | 5. | Certificate of Status Desired <input checked="" type="checkbox"/> | \$8.75 | Additional Fee Required |
| 23 | 23. Zip 32730 | 28 | 28. Zip 32730 | 6. | Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> | \$5.00 | May Be Added to Fees |
| 24 | 24. Country USA | 29 | 29. Country USA | 8. | This corporation owes the current year Intangible Personal Property. | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |

3. Date Incorporated or Qualified
 May 28, 1998

10. Name and Address of New Registered Agent

| | |
|----|--|
| 81 | Name |
| 82 | Street Address (P.O. Box Number is Not Acceptable) |
| 83 | 000003052750--1 |
| 84 | City FL 32730 |

9. Name and Address of Current Registered Agent

Hsiu Lung Tsai
 2905 Lakeview Drive
 Fern Park, FL 32730

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.

Hsiu Lung Tsai, Director

SIGNATURE: *Hsiu Lung Tsai*
 Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

| 12. OFFICERS AND DIRECTORS | | 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 | |
|----------------------------|--|---|--|
| TITLE | Director <input type="checkbox"/> DELETE | 1.1 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | Hsiu Lung Tsai | 1.2 NAME | |
| STREET ADDRESS | 2905 Lakeview Drive | 1.3 STREET ADDRESS | 000003052750--1 |
| CITY-STATE-ZIP | Fern Park, FL 32730 | 1.4 CITY-ST-ZIP | -11/23/99--01026--024 |
| TITLE | Director <input type="checkbox"/> DELETE | 2.1 TITLE | ****758.75 <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | Fang Xian Chen | 2.2 NAME | |
| STREET ADDRESS | 2905 Lakeview Drive | 2.3 STREET ADDRESS | |
| CITY-STATE-ZIP | Fern Park, FL 32730 | 2.4 CITY-ST-ZIP | |
| TITLE | <input type="checkbox"/> DELETE | 3.1 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | | 3.2 NAME | |
| STREET ADDRESS | | 3.3 STREET ADDRESS | |
| CITY-STATE-ZIP | | 3.4 CITY-ST-ZIP | |
| 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 | <i>Hsiu Lung Tsai</i> |
| CITY-STATE-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-STATE-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-STATE-ZIP | | 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: *Hsiu Lung Tsai* Hsiu Lung Tsai, Director 11/0/99 (407)482-0023

CR2E034 (5/99)