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

PROFIT CORPORATION **ANNUAL REPORT**

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

(0)

PACIFIC OVERSEAS CONSULTANTS, INC.

FILED Mar 13 1998 8:00am Secretary of State



Principal Place of Business Mailing Address										-)
800 BRICKELL AVE. SUITE 1110 MIAMI FL 33131					800 BRICKELL AVE. SUITE 1110 MIAMI FL 33131					DO NOT WRITE IN THIS SPACE
MINIMI (E GO				191	(MM) * E 00101					3. Date incorporated or Qualified
										09/08/1992
2. Principal P	Place of Busi	ness		2a.	Mailing Address					4. FEI Number Applied For
21				26						65-0365714 Not Applicable
Suite, Apt. #, etc.					Suite, Apt. #, etc.					Certificate of Status Desired Sa.75 Additional
_				27						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	\bot	Country			8. This corporation owes or has paid the current year Intangible
24	25			29						Personal Property Tax due June 30. Yes No
9. Name and Address of Current Registered Agent							81	T None		10. Name and Address of New Registered Agent
	AM, TONY						°'	Name	,	
6915 RED ROAD						82 St			Addres	ess (P.O. Box Number is Not Acceptable)
	JITE 210							<u> </u>		
C0	dral Gabi	ES FL 3314	3				83	ì		·
							84	City		85 Zip Code
								<u> </u>		FL '
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										
	Signature, typed		registered agent and				d Age	ent signatur	beriuper er	d when reinstating) DATE
12.		OFF	ICERS AND DI	HEC		13.			,	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	D	A 1180 F			☐ DELETE	1.1 T			İ	☐ Change ☐ Addition
NAME CORREA, LUIS E							AME			
STREET ADDRESS 800 BRICKELL AVE., SUITE 11' CITY-ST-ZIP MIAMI FL 33131								ADDRESS		
CITY-ST-ZIP	-	FL 33131			- DELETE			ST - ZIP		Oleman Addition
TITLE	D				☐ DELETÉ	2.1 7				L. Change L. Addition
NAME	RASSMUSS, JUAN							2.2 NAME		
STREET ADDRESS 800 BRICKELL AVE., SUITE 11							2.3 STREET ADDRESS			
CITY-ST-ZIP		FL 33131			Dec est			ST-ZIP	ļ	
TITLE	D				☐ DELETÉ	3.1 T	ITLE		1	Change Addition
NAME		ENRIQUE	A41000 4415			3.2 N	AME			
STREET ADDRESS			., SUITE 1110)		3.3 S	TREET	ADDRESS		
CITY-ST-ZIP	MIAMI	EL 33131						ST-ZIP	 	
TITLE					L DELETE	4.1 T			1	Change Addition
NAME						4.21	IAME		+	
STREET ADDRESS						4.3 S	TREET	ADDRESS	1	
CITY-ST-ZIP						4.4 C	ITY-S	T-ZIP		
TITLE					DELETE	5.1 T	TLE			Change Addition
NAME						5.2 N	AME			
STREET ADDRESS						5.3 S	TREET	ADDRESS		
CITY-ST-ZIP						5.4 C	my-s	T-ZIP		
TITLE					☐ DELETE	6.1 T	TLE			☐ Change ☐ Addition
NAME						6.2 N	AME			
STREET ADDRESS						6.3 S	TREET	ADDRESS		
CITY-ST-ZIP								T-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 if shanged, or on an algorithm with an address.

tnarue.

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