PROFIT CORPORATION ANNUÀL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT **96000003370**1 1. Corporation Name

PACIFIC INTERNATIONAL SERVICES INC.

Jun 22, 1999 8:00 am Secretary of State

06-22-1999 90004 038 ***150.00



	,							
Principal Place of Business Mailing Address								
65 EAST 55TH	ST.	65 EAST 55TH ST.						
NEW YORK NY	10022	NEW YORK NY 10022	NEW YORK NY 10022			DO NOT WRITE IN THIS SPACE		
						3. Date Incorporated or Qualifed		
						07/02/1996		
2. Principal P	lace of Business	2a. Mailing Address				4. FEI Number Applied For		
21	acc of Business	26				13-3763118 Not Applicable		
Suite, Apt. #, etc.		Suite, Apt. #, etc.				\$8.75 Additional		
22		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 LJ Added to Fees		
Zip Country _ =		Zip: Country			•	8. This corporation owes the current year Intangible		
24	25	29 36	D			Personal Property Tax. Yes No		
	9. Name and Address of Curre	nt Registered Agent		101		10. Name and Address of New Registered Agent		
	CORPORATION SYSTEM			81	Name			
			82	Street Addre	ess (P.O. Box Number is Not Acceptable)			
	SOUTH PINE ISLAND ROAD					***************************************		
PLAF	NTATION FL 33324			83				
				84	City	85 Zip Code		
-	·					FL		
11. Pursuant	to the provisions of Sections 607.05	02 and 607.1508, Florida Statutes	, the a	above-i	named corpo na corporation	oration submits this statement for the purpose of changing its registered on's board of directors. I hereby accept the appointment as registered		
agent. I a	m familiar with, and accept the oblig	ations of, Section 607.0505, Florid	a Stat	tutes	остротоше	, , , , , , , , , , , , , , , , , , , ,		
SIGNATURE								
	Signature, typed or printed name of registered ag		_	d Agent s	ignature required	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	86	
12.		ND DIRECTORS	13. TE 1,1 TML			ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR IN 12	(11/98)	
TITLE	DP CARLOC A	- Dett.	1.2 NA					
NAME	AGUIRRE, CARLOS A		•		ODDEEC		8	
STREET ADDRESS	65 EAST 55TH ST.		ŧ	TREET A			CR2E034	
CITY-ST-ZIP	NEW YORK NY 10022	□ DELETE	2.1 T	TTY-ST-Z	ZIP	☐ Change ☐ Addition	5	
TITLE	DS CADLOS	- Dest. 12	2.1 N					
NAME	AHLSTROM, CARLOS				ODDECO			
STREET ADDRESS	65 EAST 55TH ST.		ı	TREET A	Į.	,		
CITY-ST-ZIP	NEW YORK NY 10022	☐ DELETE	3.1 TI	CITY-ST-	ZIP	☐ Change ☐ Addition		
TITLE	DV NOUATI	- DELETE	3.1 N					
NAME	BERGEN, MICHAEL				DORESS			
STREET ADDRESS	9 65 E161 6511 61.					المادية المستنصرة المستنصرة	. —	
CITY-ST-ZIP	NEW YORK NY=10022-	☐ DELETE	3.4, C	CITY: ST:	ZIP	☐ Change ☐ Addition		
TITLE	DT					_ , _		
NAME	HICKEY, EDWARD W		4. 2 NA 4.3 STR		DDDCCC			
STREET ADDRESS	***				ł			
CITY-ST-ZIP TITLE	NEW YORK NY 10022		_	ITY-ST-Z	LIF	☐ Change ☐ Addition		
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NAME CTREET ADDRESS				TREET A	DDRESS			
STREET ADDRESS				HTY-ST-				
CITY-ST-ZIP			6.1 T			Change Addition		
TITLE			ľ	IAME				
NAME			4	TREET A	DORESS			
STREET ADDRESS			1					

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, with all other like empowered.

SIGNATURE: 2

Daytime Phone #