

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

95 MAR 14 AM 10:48

DOCUMENT # **P19202** (1)
1. Corporation Name
PACTEL FINANCE, INC.

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business Mailing Address
130 KEARNY STREET **130 KEARNY STREET**
ROOM 3609 **ROOM 3609**
SAN FRANCISCO CA 94108 **SAN FRANCISCO CA 94108**
US **US**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified **05/11/1988** 3a. Date of Last Report Applied For
05/01/1994 **Not Applicable**

2. Principal Place of Business 2a. Mailing Address
21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.
22 City & State 27 City & State
23 Zip 24 Country 28 Zip 29 Country 30

4. FEI Number **94-2942781**
5. Certificate of Status Desired **\$8.75 Additional Fee Required**
6. Election Campaign Financing Trust Fund Contribution **\$5.00 May Be Added to Fees**
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes Yes No

9. Name and Address of Current Registered Agent
THE PRENTICE-HALL CORPORATION SYSTEM INC.
1201 HAYS STREET
SUITE 105
TALLAHASSEE FL 32301

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City **FL** 85 Zip Code

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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	POCE -	1.1 TITLE	P/D/CEO <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	TAYLOR, E.D.	1.2 NAME	BARNES, L. T.
STREET ADDRESS	130 KEARNY STREET	1.3 STREET ADDRESS	130 KEARNY STREET
CITY-ST-ZIP	SAN FRANCISCO CA	1.4 CITY-ST-ZIP	SAN FRANCISCO, CA 94108
TITLE	AS	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HENRY, D. G.	2.2 NAME	
STREET ADDRESS	130 KEARNY STREET, ROOM 3609	2.3 STREET ADDRESS	
CITY-ST-ZIP	SAN FRANCISCO CA	2.4 CITY-ST-ZIP	
TITLE	S-	3.1 TITLE	AS <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ROEMER, E.K. -	3.2 NAME	ROEMER, E.K.
STREET ADDRESS	130 KEARNY STREET, ROOM 3609 -	3.3 STREET ADDRESS	130 KEARNY STREET, ROOM 3609
CITY-ST-ZIP	SAN FRANCISCO CA	3.4 CITY-ST-ZIP	SAN FRANCISCO, CA
TITLE	D	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DOWNING, W.E.	4.2 NAME	
STREET ADDRESS	130 KEARNY STREET	4.3 STREET ADDRESS	
CITY-ST-ZIP	SAN FRANCISCO CA	4.4 CITY-ST-ZIP	
TITLE	VCEO -	5.1 TITLE	S <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BARNES, L.T.	5.2 NAME	CHUNG, J. E.
STREET ADDRESS	130 KEARNY STREET -	5.3 STREET ADDRESS	130 KEARNY STREET, ROOM 3609
CITY-ST-ZIP	SAN FRANCISCO CA -	5.4 CITY-ST-ZIP	SAN FRANCISCO, CA
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), 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, changed, or on an attachment with an address.

SIGNATURE: *Janie Chung* **J. E. CHUNG** **3-3-95** **(415) 394-3538**
Signature, typed or printed name of working officer or director Date Daytime Phone #