

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000006235

FILED  
Jan 23, 2009  
Secretary of State

Entity Name: PANAMERICAN USA FOUNDATION, INC.

**Current Principal Place of Business:**

11420 NORTH KENDALL DR.  
207  
MIAMI, FL 33176

**New Principal Place of Business:**

**Current Mailing Address:**

15655 SW 82ND CIR LN SUITE 516  
MIAMI, FL 33193

**New Mailing Address:**

FEI Number: 65-1134005      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

MANTILLA, KERMIT  
15655 SW 82ND CIR LN SUITE 516  
MIAMI, FL 33193      US

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

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**OFFICERS AND DIRECTORS:**

Title: D      ( ) Delete  
Name: MANTILLA, KERMIT  
Address: 15655 SW 82ND CIR LN SUITE 516  
City-St-Zip: MIAMI, FL 33193

Title: P      ( ) Delete  
Name: KELLY, SARA  
Address: 1155-100 STREET  
City-St-Zip: BAY HARBOR ISLAND, FL 33154

Title: D      ( ) Delete  
Name: OGDEN, IRMA  
Address: 2150 SANSOUCCI BLVD #902  
City-St-Zip: NO. MIAMI BEACH, FL 33181

Title: D      ( ) Delete  
Name: GENAO, ESTEBAN  
Address: 13059 SW 112 STREET  
City-St-Zip: MIAMI, FL 33186

Title: D      ( ) Delete  
Name: CARO, PAUL  
Address: 17712 SW. 134 CT  
City-St-Zip: MIAMI, FL 33177

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: KERMIT MANTILLA

D

01/23/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date