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Apr 21 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997



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

DOCUMENT # P95000075360 (4)

1. Corporation Name
PANTELLA CORPORATION



Principal Place of Business
4137 N. FEDERAL HWY
BOCA RATON FL 33431
US

Mailing Address
4137 NORTH FEDERAL HWY
BOCA RATON FL 33431-4528
US

3. Date Incorporated or Qualified: 09/29/1995
3a. Date of Last Report: 08/01/1996

2. Principal Place of Business: 21 4577 CARAMBOLA CIR S
2a. Mailing Address: 26 4577 CARAMBOLA CIR S

4. FEI Number: 65-0611215
Applied For: Not Applicable

22 Suite, Apt. #, etc.

6. Certificate of Status Desired: \$8.75 Additional Fee Required

23 City & State: COCONUT CREEK, FL
27 City & State: COCONUT CREEK, FL

6. Election Campaign Financing Trust Fund Contribution: \$5.00 May Be Added to Fees

24 Zip: 33066 25 Country: BROWARD
29 Zip: 33066 30 Country: BROWARD

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes: Yes No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

HOCHFELSEN, JEFFREY
2101 CORPORATE BLVD NW
SUITE 204
BOCA RATON FL 33431

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

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	PST	<input type="checkbox"/> DELETE
NAME	PANICO, FAY T	
STREET ADDRESS	4577 CARAMBOLA CIRCLE SOUTH	
CITY - ST - ZIP	COCONUT CREEK FL 33066	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

11 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12 NAME	
13 STREET ADDRESS	
14 CITY - ST - ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY - ST - ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY - ST - ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY - ST - ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY - ST - ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY - ST - ZIP	

14. I do 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: *Fay Teller Panico* FAY TELLER PANICO 4/14/97 954-978-8614

CR2E034 (9/96)