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

STREET ADDRESS

CITY-ST-ZIP

FILED Apr 15 1998 8:00am **PROFIT** ELORIDA DEPARTMENT DE STATE CORPORATION Sandra B. Mortham Secretary of State ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # 147384 PAN AM SUPPLY CO Principal Place of Business Mailing Address 2525 N W 75TH STREET 2525 N W 75TH STREET **MIAMI FL 33147** MIAMI FL 33147 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 06/12/1946 2. Principal Place of Business 2a. Mailing Address FEI Number Applied For 59-0553290 Not Applicable 21 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 27 City & State City & State \$5.00 May Be 6, Election Campaign Financing Trust Fund Contribution Added to Fees 23 28 Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible 25 29 Personal Property Tax due June 30. □ No 24 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent **B1** SHAHEEN, ALBERT J 6801 S.W. 80 AVENUE 82 Street Address (P.O. Box Number is Not Acceptable) **MIAMI FL 33143** 83 85 Zip Code 84 City 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 Ide if applicable (NOTE Registered Agent signature required whon reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. Change X Addition DELETE 1.1 TITLE TITLE SHAHEEN, ALBERT J SALAZAR, ZULEIKA NAME 1.2 NAME 6801 S.W. 80 AVE. 7649 N.W. 168 ST STREET ADDRESS 1.3 STREET ADDRESS MIAMI FL MIAMI, FL 33015 1.4 CITY-ST-ZIP CITY-ST-ZIP Change ☐ DEL**ETE** Addition 2.1 TITLE SHAHEEN, FRANCES C. NAME 2.2 NAME 6801 S.W. 80 AVE. STREET ADDRESS 2.3 STREET ADDRESS MIAMI FL CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE Change Addition 3.1 TITLE TITLE SHAHEEN, ALBERT R. 3.2 NAME NAME 8300 SW 60TH AVE. STREET ADDRESS 3.3 STREET ADDRESS MIAMI FL CITY-ST-ZIP 3.4. CITY-ST-ZIP Addition DELETE Change TITLE VD 4,1 TITLE SHAHEEN, MICHAEL J. NAME 4.2 NAME 4903 GRACE ST. STREET ADDRESS 4.3 STREET ADDRESS TAMPA FL CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE Change Addition TITLE 5.1 TITLE HUTTO, R. EUGENE NAME 5.2 NAME 4743 N.W. 98TH PL. STREET ADDRESS 5.3 STREET ADDRESS MIAMI FL CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE ☐ Addition 61 TITLE TITLE NAME 6.2 NAME

6.3 STREET ADDRESS

. Shaheen

691-0 CD

6.4 CITY-ST-ZIP

1. Thereby 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 suppliemental 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 charged) or on an attaching it with an orders.