

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000001283

Entity Name: PHILIPPINE ASSOCIATION OF MEDICAL TECHNOLOGISTS
(PAMET-USA) FLORIDA CHAPTER, INCORPORATED

FILED
Feb 18, 2020
Secretary of State
1728873626CC

Current Principal Place of Business:

23089 VIA STEL
BOCA RATON, FL 33433

Current Mailing Address:

23089 VIA STEL
BOCA RATON, FL 33433 US

FEI Number: 26-1893817

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CALAOR, ALAN B
23089 VIA STEL
BOCA RATON, FL 33433 US

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: ALAN B. CALAOR 02/18/2020

Electronic Signature of Registered Agent Date

Officer/Director Detail :

Title	AD	Title	OTHER, ADVISOR
Name	GALANG, CARMELITA P	Name	BAUTISTA, LUCITA FE F
Address	7597 DREW OAK DRIVE	Address	9720 94TH ST. NORTH
City-State-Zip:	SEMINOLE FL 33772	City-State-Zip:	SEMINOLE FL 33777
Title	S	Title	TREASURER
Name	GAAS, TRINIDAD	Name	JEFFRY, NG
Address	1701 GREEN ROAD	Address	1701 GREEN ROAD
City-State-Zip:	POMPANO FL 33064	City-State-Zip:	POMPANO FL 33064
Title	AD	Title	PRESIDENT
Name	EDUARDO, MA. EUGENIA L	Name	CALAOR, ALAN B
Address	9977 SAVANNAH BLUFF	Address	23089 VIA STEL
City-State-Zip:	ORLANDO FL 32828	City-State-Zip:	BOCA RATON FL 33433
Title	VP	Title	VP
Name	JUAN, RONEL	Name	DAODAO, PERRY
Address	6100 FOREST HILL BLVD	Address	23089 VIA STEL
City-State-Zip:	WEST PALM BEACH FL 33415	City-State-Zip:	BOCA RATON FL 33433

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I hereby 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 all other like empowered.

SIGNATURE: ALAN B. CALAOR PRESIDENT 02/18/2020

Electronic Signature of Signing Officer/Director Detail Date

Officer/Director Detail Continued :

Title VP
Name LIM, ILLINOR KRISTIN
Address 23089 VIA STEL
City-State-Zip: BOCA RATON FL 33433