

**2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P08000019147

**Entity Name:** PAMN USA INC.

**Current Principal Place of Business:**

201 SOUTH BISCAYNE BLVD  
1200  
MIAMI, FL 33131

**Current Mailing Address:**

201 SOUTH BISCAYNE BLVD  
1200  
MIAMI, FL 33131 US

**FEI Number:** 26-2044697

**Certificate of Status Desired:** No

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

CMS INTERNATIONAL ENTERPRISES, INC.  
550 BILTMORE WAY  
200  
CORAL GABLES, FL 33134 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:**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title DP  
Name CAVALCANTE, PAULO ROBERTO  
Address 201 SOUTH BISCAYNE BLVD STE  
1200  
City-State-Zip: MIAMI FL 33131

Title D  
Name CAVALCANTE NETO, MARIO COSTA  
Address 201 SOUTH BISCAYNE BLVD STE  
1200  
City-State-Zip: MIAMI FL 33131

Title D  
Name CAVALCANTE, ANDRE  
Address 201 SOUTH BISCAYNE BLVD STE  
1200  
City-State-Zip: MIAMI FL 33131

Title D  
Name TORREGROSSA, NORIVAL JR.  
Address 201 SOUTH BISCAYNE BLVD STE  
1200  
City-State-Zip: MIAMI FL 33131

*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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** PAULO ROBERTO CAVALCANTE

DP

04/28/2014

Electronic Signature of Signing Officer/Director Detail

Date