

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

FILED

Apr 15 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
DOCUMENT # 147384 (2) 1. Corporation Name PAN AM SUPPLY CO		

Principal Place of Business 2525 N W 75TH STREET MIAMI FL 33147	Mailing Address 2525 N W 75TH STREET MIAMI FL 33147
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21		2a. Mailing Address 26		3. Date Incorporated or Qualified 06/12/1946	
Suite, Apt. #, etc. 22		Suite, Apt. #, etc. 27		4. FEI Number 59-0553290	
City & State 23		City & State 28		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
Zip 24		Zip 29		6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees	
Country 25		Country 30		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☒ Yes ☐ No	

9. Name and Address of Current Registered Agent SHAHEEN, ALBERT J 6801 S.W. 80 AVENUE MIAMI FL 33143		10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 Zip Code	
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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 PD	SHAHEEN, ALBERT J ☐ DELETE	1.1 TITLE D	SALAZAR, ZULEIKA ☐ Change ☒ Addition
NAME SHAHEEN, ALBERT J		1.2 NAME SALAZAR, ZULEIKA	
STREET ADDRESS 6801 S.W. 80 AVE.		1.3 STREET ADDRESS 7649 N.W. 168 ST	
CITY-ST-ZIP MIAMI FL		1.4 CITY-ST-ZIP MIAMI, FL 33015	
TITLE SD	SHAHEEN, FRANCES C. ☐ DELETE	2.1 TITLE	☐ Change ☐ Addition
NAME SHAHEEN, FRANCES C.		2.2 NAME	
STREET ADDRESS 6801 S.W. 80 AVE.		2.3 STREET ADDRESS	
CITY-ST-ZIP MIAMI FL		2.4 CITY-ST-ZIP	
TITLE VD	SHAHEEN, ALBERT R. ☐ DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME SHAHEEN, ALBERT R.		3.2 NAME	
STREET ADDRESS 8300 SW 60TH AVE.		3.3 STREET ADDRESS	
CITY-ST-ZIP MIAMI FL		3.4 CITY-ST-ZIP	
TITLE VD	SHAHEEN, MICHAEL J. ☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME SHAHEEN, MICHAEL J.		4.2 NAME	
STREET ADDRESS 4903 GRACE ST.		4.3 STREET ADDRESS	
CITY-ST-ZIP TAMPA FL		4.4 CITY-ST-ZIP	
TITLE D	HUTTO, R. EUGENE ☒ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME HUTTO, R. EUGENE		5.2 NAME	
STREET ADDRESS 4743 N.W. 98TH PL.		5.3 STREET ADDRESS	
CITY-ST-ZIP MIAMI FL		5.4 CITY-ST-ZIP	
TITLE	☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I 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: *Albert J. Shaheen* **Albert J. Shaheen** 04/10/98 305 691-0581

CR2E034 (10/97)