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

PROFIT CORPORATION ANNUAL REPORT 1997

Principal Place of Business



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 405687

(5)

Mailing Address

PAN AMERICAN FROZEN FOODS, INC.

FILED								
Jan 14 1997 8:00am								
Secretary of State								



1496 N.W. 23 P.O.BOX 4205 MIAMI FL 332	i92	1496 N.W. 23 STREET P.O.BOX 420592 MIAMI FL 33242-0592			3. Date Incorporated or Qualified 07/26/1972		ate of Last R	eport	
2. Principal F	Place of Business	2a. Mailing Address				4. FEI Number			plied For
21		26				59-1407314		No	t Applicable
Suite, Apt	#, etc.	Suite, Apt. #, etc				5. Certificate of Status Desired		\$8.75	Additional
22		27				G. Cermicate of Status Desired		Fee Re	quired
City & Stat	te	City & State				6. Election Campaign Financing		\$5.00	•
23		28	<u>.</u>			Trust Fund Contribution		Added t	
Zip	Country	Zιρ	Count	lfy		8. This corporation has liability for i			199.032,
24	25	[29]	30			Florida Statutes 10. Name and Address of New Re	Yes [
	9. Name and Address of Curre	int Registered Agent	9	11	Name	(U. Name and Address of New Ne	Alerei en	Myout	
	INARRIZ, LAZARO		١	"					
	96 N.W. 23RD. ST.		ê	2	Street Ad	ldress (P.O. Box Number is Not Acceptab	le)		
MLA	VMI FL 33142		ļ.,	3					
			l°						
			8	4	City			85 Zip (Code
		00 1007 1500 51 11 0	1	╧		orporation submits this statement for the p	FL		
agent. I a	am familiar with, and accept the obli Signors: special model nexicological a OFFICERS A	•				quired when reinstating) ADDITIONS/CHANGES TO OFFIC	DATE ERS AND	DIRECTOR	S IN 12
TITLE	PD	DELETE	1.1 MIL	E				Change	Addition
NAME	MUNARRIZ, LAZARO R.	-	1,2 NAM	1F					
STREET ADDRESS	AAGO BRAL OO OT				ADDRESS				
CITY-ST-ZIP	MIAMI FL		1.4 CITY						
TITLE	V	DELETE	2.1 TITL					Change	Addition
NAME	HERRERA, EDUARDO		2.2 NAM	4E					
STREET ADDRESS	AARAA A UU ATTU AT		2.3 \$18	EET A	ADDRESS				
CITY-S1-ZIP	MIAMI FL		2 4 017	Y-S	I - ZIP				
TITLE	SD	☐ DELETE	3.1 HIL	E				Change	Addition
NAME	MUNARRIZ, RAQUEL		3.2 NAM	4E					
STREET ADDRESS	ALON ARM ON OTOPICT		3.3 STR	EET A	ADDRESS				
CITY-ST-7/P	MIAMI FL		3.4. CIT	Y - S	1 - ZIP				
TITLE	AVD	DELETE	4.1 TITE	Ę				☐ Change	Addition
NAME	MUNARRIZ, RICARDO		4 2 NA/	ME					
STREET ADDRESS	1496 NW 23RD ST		4 3 STR	EET /	ADDRESS				
CITY-ST-ZIP	MIAMI FL		4.4.0(1)	r - \$1	9IZ-1		<u></u>		
TITLE	AVD	☐ DELETE	. 51 TOTA	£				☐ Change	Addition
NAME	ULLOA, ZENAIDA		5.2 NAN	Æ					
STREET ADDRESS			53 STR	EET	ADDRESS				
CITY - ST - ZIP	MIAMI FL		54 CITY	Y-S1	r-ZiP				
TITLE	AVD	☐ DELETE	6 1 TITL	.E				Change	Addition
NAME	DIAZ, RAQUEL		6.2 NAN	ΛE					
STREET ADDRESS			63 SIR	EET.	ADDRESS				
CITY - ST - 7IP	MIAMI FL		6.4 CITY	Y-\$1	T-21P				

14. I do hereby certify that the information supplied with this fling 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 supplied 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 trusted 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

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFF

EDURA HERRERA

16/17 305 63333344

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