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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 550452 1. Corporation Name

PANINTERTRADE, INC.

Principal Place	of Business	Mailing Address) (deret eriet attit dette etekt stell stell sielt diett eren alan etekt eren
1000. 011 120 011121		13501 SW 128 STREET				
SUITE 214	•	SUITE 214				DO NOT WRITE IN THIS SPACE
Miami FL 33186 US		MIAMI FL 33186				3. Date Incorporated or Qualifed
US						11/01/1977
a Principal Pl	ace of Business	2a. Mailing Address				4. FEI Number Applied For
2. Principal (1)	ace of Educations	26				59–1808971 Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				\$8.75 Additional
22		27				5. Certificate of Status Desired Fee Required
City & State	9	City & State				6. Election Campaign Financing \$5.00 May Be
23	<u> </u>	28				Trust Fund Contribution Added to Fees
Zip	Country	Zip		ountry		8. This corporation owes the current year Intangible
24	25	29	30			Personal Property Tax. Yes No. 10. Name and Address of New Registered Agent
	9. Name and Address of Curren	t Registered Agent		81	Name	10. Name and Address of New Registered Agent
WER	B-HARRIS, NINA A.			"		
	1 S.W. 71ST LANE			82	Street Ad	ddress (P.O. Box Number is Not Acceptable)
MIAN				83		
MILAN	" ' L			55	İ	
				84	City	FL 85 Zip Code
	(0.4)		tritoe the	above	e-named co	amoration submits this statement for the purpose of changing its registered
office or r	edictored agent or both in the State	of Florida, Such change was	s autriorizi	eu by	tire corpora	ration's board of directors. I hereby accept the appointment as registered
agent. I a	m familiar with, and accept the obliga	tions of, Section 607.0505, F	Florida Sta	atutes	i.	
SIGNATURE	Signature, typed or printed name of registered ager	nt and title if applicable (NC	TF: Register	red Ager	nt signature regu	quired when reinstating) DATE
12.		ID DIRECTORS	13			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	PD	☐ DELETE		TITLE		☐ Change ☐ Addition
NAME	WEBB-HARRIS, REGINALD L.		1.2	NAME		
STREET ADDRESS	13971 S.W. 71ST LANE				TADDRESS	
CITY-ST-ZIP			1.3	STREET	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
	MIAMITL		1	STREET CITY-S	1	
TITLE	MIAMI FL DV	☐ DELETE	1.4		1	☐ Change ☐ Addition
	DV	☐ DELETE	1.4 2.1	CITY-S	1	☐ Change ☐ Addition
TITLE		☐ DELETE	1.4 2.1 2.2	CITY-S TITLE NAME	1	Change ☐ Addition
TITLE NAME	DV WEBB-HARRIS, NINA ANN	☐ DELETE	1.4 2.1 2.2 2.3	CITY-S TITLE NAME	T ADDRESS	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	DV Webb-Harris, Nina ann 13971 S.W. 71ST Lane		1.4 2.1 2.2 2.3 2.4 3.1 3.2	CITY-S TITLE NAME STREE CITY-S TITLE	T ADDRESS	
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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, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

(M.1) (2) [EM NAME OF SIGNING OFFICER OR DIRECTOR

Daytime Phone #