

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 846468

FILED  
Apr 23, 2009  
Secretary of State

Entity Name: PAN-CARIB REALTORS, INC.

## Current Principal Place of Business:

881 OCEAN DR AP 11D  
KEY BISCAYNE, FL 33149

## New Principal Place of Business:

881 OCEAN DR  
11D  
KEY BISCAYNE, FL 33149

## Current Mailing Address:

881 OCEAN DR AP 11D  
KEY BISCAYNE, FL 33149

## New Mailing Address:

881 OCEAN DR  
11D  
KEY BISCAYNE, FL 33149

FEI Number: 59-1769141

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SEGOVIA, MAURICIO  
881 OCEAN DR AP 11D  
KEY BISCAYNE, FL 33149 US

## Name and Address of New Registered Agent:

SEGOVIA, MAURICIO  
881 OCEAN DR AP  
11D  
KEY BISCAYNE, FL 33149 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:

04/23/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PSD ( ) Delete  
Name: SEGOVIA, MAURICIO  
Address: 881 OCEAN DR AP 11D  
City-St-Zip: KEY BISCAYNE, FL 33149

Title: AS ( ) Delete  
Name: SEGOVIA, JUANITA  
Address: 881 OCEAN DR AP 11D  
City-St-Zip: KEY BISCAYNE, FL 33149

Title: D ( ) Delete  
Name: SEGOVIA, CATALINA  
Address: 881 OCEAN DR AP 11D  
City-St-Zip: KEY BISCAYNE, FL 33149

Title: VTD ( ) Delete  
Name: PUYANA DE SEGOVIA, JULIA  
Address: 881 OCEAN DR AP 11D  
City-St-Zip: KEY BISCAYNE, FL 33149

Title: D ( ) Delete  
Name: SEGOVIA, PILAR  
Address: 881 OCEAN DR AP 11D  
City-St-Zip: KEY BISCAYNE, FL 33149

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: MAURICIO SEGOVIA

PSD

04/23/2009

Electronic Signature of Signing Officer or Director

Date