

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F07000006089

Entity Name: PC CAPITAL (PANAMA) CORP.

FILED  
May 20, 2008  
Secretary of State

## Current Principal Place of Business:

VIA ESPANA  
EDIFICIO BANCO DE BOSTON, PISO 8  
PANAMA CITY, PANAMA,

## New Principal Place of Business:

VIA ESPANA  
EDIFICIO BANCO DE BOSTON, PISO 8  
PANAMA CITY, PANAMA, SA PANAMA

## Current Mailing Address:

C/O FOWLER RODRIGUEZ  
355 ALHAMBRA CIRCLE STE 801  
CORAL GABLES, FL 33134

## New Mailing Address:

FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

REGISTERED AGENT CORPORATE SERVICES, INC.  
355 ALHAMBRA CIRCLE, STE 801  
CORAL GABLES, FL 33134 US

## Name and Address of New Registered Agent:

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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.  
Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: CPT ( ) Delete  
Name: ROSALES, BENJAMIN  
Address: 445 GRAND BAY DRIVE APT #418  
City-St-Zip: KEY BISCAYNE, FL 33149

Title: DS ( ) Delete  
Name: GIROTA, GIANA  
Address: 445 GRAND BAY DRIVE APT #418  
City-St-Zip: KEY BISCAYNE, FL 33149

Title: D ( ) Delete  
Name: DE SAAVEDRA, MARTA  
Address: 445 GRAND BAY DRIVE APT #418  
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:

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: BENJAMIN ROSALES

CPT

05/20/2008

Electronic Signature of Signing Officer or Director

Date