

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F07000006252

FILED  
Mar 23, 2009  
Secretary of State

Entity Name: PAN CAPITAL AKTIEBOLAG COMPANY

## Current Principal Place of Business:

401 EAST LAS OLAS BLVD.  
SUITE 1590  
FORT LAUDERDALE, FL 33301

## Current Mailing Address:

401 EAST LAS OLAS BLVD.  
SUITE 1590  
FORT LAUDERDALE, FL 33301

## New Principal Place of Business:

500 E BROWARD  
SUITE 1620  
FORT LAUDERDALE, FL 33301

## New Mailing Address:

500 E BROWARD  
SUITE 1620  
FORT LAUDERDALE, FL 33301

FEI Number: 20-2643301

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 323012525 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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: CHRM ( ) Delete  
Name: PENSER, ERIK  
Address: COMPTON BEAUCHAMP HOUSE SWINDON SN6 8NN  
City-St-Zip: ENGLAND,

Title: VCHR ( ) Delete  
Name: THULIN, LARS  
Address: FINNGATAN 3, S-223 62 LUND  
City-St-Zip: SWEDEN,

Title: D ( ) Delete  
Name: OSCARSSON, PETER  
Address: SLATTERVAGEN 4 C, E-227 38 LUND  
City-St-Zip: SWEDEN,

Title: D ( ) Delete  
Name: AKERHJELM, JOHAN  
Address: ERIKSBERGSGATAN 14, S-114 30 STOCKHOLM  
City-St-Zip: SWEDEN,

Title: P ( ) Delete  
Name: JULANDER, CLARES-HENRIK  
Address: VINDKALLSVAGEN 7, S-182 61 DJURSHOLM  
City-St-Zip: SWEDEN,

Title: V ( ) Delete  
Name: SANDA, PAR  
Address: 624 RIVERIA ISLE DRIVE  
City-St-Zip: FORT LAUDERDALE, FL

## 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:

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: PAR SANDA

V

03/23/2009

Electronic Signature of Signing Officer or Director

Date