

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F98000005805

1. Entity Name
PAN-AMERICAN FINANCIAL SECURITIES SALES COMPANY

FILED
Mar 20, 2001 8:00 am
Secretary of State

03-20-2001 90016 013 ***150.00

Principal Place of Business

601 POYDRAS ST.
SUITE 1200
NEW ORLEANS LA 70130
US

Mailing Address

601 POYDRAS ST.
SUITE 1200
NEW ORLEANS LA 70130
US

2. Principal Place of Business

Louisiana

Suite, Apt. #, etc.

Suite 2600

City & State

New Orleans, LA

Zip

70130

Country

U.S.A.

3. Mailing Address

601 Poydras Street, Suite 2600

Suite, Apt. #, etc.

Suite 2600

City & State

New Orleans, LA

Zip

70130

Country

U.S.A.



DO NOT WRITE IN THIS SPACE

4. FEI Number 72-1009902

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	ROBERTS, JOHN K JR.	
STREET ADDRESS	601 POYDRAS ST.	
CITY-ST-ZIP	NEW ORLEANS LA 70130	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	PURVIS, G. FRANK JR.	
STREET ADDRESS	601 POYDRAS ST.	
CITY-ST-ZIP	NEW ORLEANS LA 70130	
TITLE	DP	<input type="checkbox"/> Delete
NAME	LORIO, RENE	
STREET ADDRESS	601 POYDRAS STREET, SUITE 1200	
CITY-ST-ZIP	NEW ORLEANS LA 70130	
TITLE	DV	<input checked="" type="checkbox"/> Delete
NAME	LOMBARD, PATRICIA A	
STREET ADDRESS	601 POYDRAS ST.	
CITY-ST-ZIP	NEW ORLEANS LA 70130	
TITLE	DT	<input type="checkbox"/> Delete
NAME	STRAUB, PHILIP J	
STREET ADDRESS	601 POYDRAS ST.	
CITY-ST-ZIP	NEW ORLEANS LA 70130	
TITLE	V	<input checked="" type="checkbox"/> Delete
NAME	ABBRECHT, RICHARD JR	
STREET ADDRESS	601 POYDRAS STREET, SUITE 1200	
CITY-ST-ZIP	NEW ORLEANS LA 70130	

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	John J. Durante, VP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	601 Poydras Street	
STREET ADDRESS	New Orleans, LA 70130	
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/00)

UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D. C. 20549

Attachment
934838
798000005805

ANNUAL REPORT
FORM X-17A-5
PART III

FACING PAGE
Information Required of Brokers and Dealers Pursuant
to Section 17 of the Securities Exchange
Act of 1934 and Rule 17a-5 Thereunder

SEC FILE NUMBER
8-32639

REPORT FOR THE PERIOD BEGINNING 01/01/00 AND ENDING 12/31/00
MM/DD/YY MM/DD/YY

A. REGISTRANT IDENTIFICATION

NAME OF BROKER-DEALER:
PAN-AMERICAN FINANCIAL SERVICES, INC.

OFFICIAL USE ONLY

ADDRESS OF PRINCIPAL PLACE OF BUSINESS: (Do not use P.O. Box No.)

FIRM ID. NO

601 POYDRAS STREET

(No. and Street)

NEW ORLEANS,
(City)

LOUISIANA
(State)

70130
(Zip Code)

NAME AND TELEPHONE NUMBER OF PERSON TO CONTACT IN REGARD TO THIS REPORT

RENE LORIO

504-566-1300
(Area Code - Telephone No.)

B. ACCOUNTANT IDENTIFICATION

INDEPENDENT PUBLIC ACCOUNTANT whose opinion is contained in this Report*

DELOITTE & TOUCHE LLP

(Name - if individual, state last, first, middle name)

3700 One Shell Square
(Address)

New Orleans,
(City)

Louisiana
(State)

70139-3700
(Zip Code)

CHECK ONE:

☒ Certified Public Accountant

☐ Public Accountant

☐ Accountant not resident in United States or any of its possessions.

FOR OFFICIAL USE ONLY

*Claims for exemption from the requirement that the annual report be covered by the opinion of an independent public accountant must be supported by a statement of facts and circumstances relied on as the basis for the exemption. See section 240.17a-5(e)(2).

SEC 1410(2-89)