FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # G94170

PAN AMERICAN RESOURCES, INC.

Principal Place of Business Mailing Address C/O JIM R. CLARE C/O JIM R. CLARE 5223 NORTH ORIENT ROAD 5223 NORTH ORIENT ROAD TAMPA FL 33610 TAMPA FL 33610 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed 03/30/1984 2. Principal Place of Business 2a. Mailing Address 4. FEI Number 21 Applied For 26 59-2395178 Suite, Apt. #, etc. Not Applicable Suite, Apt. #, etc. 22 \$8.75 Additional 5. Certificate of Status Desired 27 City & State Fee Required City & State 6. Election Campaign Financing 23 \$5.00 May Be 28 \Box Zip Trust Fund Contribution Country Added to Fees Country 8. This corporation owes the current year intangible Personal Property Tax. 24 25 29 30 9. Name and Address of Current Registered Agent □No 10. Name and Address of New Registered Agent 81 CLARE, JIM R. 7439 E HILLSBOROUGH AVE. Street Address (P.O. Box Number is Not Acceptable) **TAMPA FL 33610** 83 85 Zip Códe 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE DP DELETE 1.1 TITLE CLARE, JIM R. ☐ Addition 1.2 NAME STREET ADDRESS 7439 E HILLSBOROUGH AVE CR2E034 1.3 STREET ADDRESS **TAMPA FL 33610** CITY-ST-ZIP 1.4 CITY-ST-ZIP ΠŒ DELETE 2.1 TITLE ESTRADA, ALFRED ☐ Change Addition 2.2 NAME STREET ADDRESS 7439 E HILLSBOROUGH AVE 2.3 STREET ADDRESS CITY-ST-ZIP **TAMPA FL 33610** 2.4 CITY-ST-ZIP TITLE D ☐ DELETE 3.1 TITLE Change NAME : VALVERDE, DON ☐ Addition 3.2 NAME STREET ADDRESS 7439 E HILLSBOROUGH AVE 3.3 STREET ADDRESS TAMPA FL 33610 CITY-ST-ZIP 3.4. CITY-ST-ZIP TITLE DELETE 4.1 TITLE NAME ... LEVY, BUDDY J. 4.2 NAME STREET ADDRESS 7439 E HILLSBOROUGH AVE 4.3 STREET ADDRESS CITY-ST-ZIP TAMPA FL 4.4 CITY-ST-ZIP TITLE □ DELETE 5.1 TITLE TAYLOR, CHERRY Change Addition 5.2 NAME STREET ADDRESS 7439 E HILLSBOROUGH AVE 5.3 STREET ADDRESS CITY-ST-ZIP TAMPA FL 5.4 CITY-ST-ZIP TITLE ☐ DELETE 6.1 TITLE WING REAL PROPERTY OF THE Change NAME ☐ Addition 6.2 NAME "阿铁石矿" STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP

6.4 CITY-ST-ZIP

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 Block 12 or Block 13 licensinged, or on an attachment with an address, with all other like empowered. SIGNATURE

(813) 623-3543

FILED

Feb 05, 1999 8:00am

Secretary of State

02-05-1999 90003 011 ***150.00