


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 05, 2007 08:00 AM
Secretary of State

DOCUMENT # K34482 1. Entity Name PAN APARTMENT COMPANY	
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Principal Place of Business C/O REVILLA, EMANUEL GONZALEZ 1627 BRICKELL AVE, APT 1901 MIAMI, FL 33129	Mailing Address C/O REVILLA, EMANUEL GONZALEZ 1627 BRICKELL AVE, APT 1901 MIAMI, FL 33129
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DO NOT WRITE IN THIS SPACE



05092007 No Chg-P CR2E034 (11/05)

4. FEI Number 65-0296053	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent GONZALEZ REVILLA, JULIE DE 1627 BRICKEL AVE APT 1901 MIAMI, FL 33129-1250
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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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable

FILE NOW!!! FEE IS \$150.00
Due by September 14, 2007

9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	\$5.00 May Be Added to Fees
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In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD REVILLA, EMANUEL G 1627 BRICKELL AVE. #1901 MIAMI, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD REVILLA, JULIE L 1627 BRICKELL AVE. #1901 MIAMI, FL
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Julie De Revilla 7/2/07
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #