

# 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000000933

Entity Name: PAN AMERICAN FOODS, LLC

FILED  
Apr 05, 2005  
Secretary of State

## Current Principal Place of Business:

300 WOODCREST RD.  
KEY BISCAYNE, FL 33149

## New Principal Place of Business:

265 GRAPETREE DR.  
#118  
KEY BISCAYNE, FL 33149

## Current Mailing Address:

300 WOODCREST RD.  
KEY BISCAYNE, FL 33149

## New Mailing Address:

265 GRAPETREE DR.  
#118  
KEY BISCAYNE, FL 33149

FEI Number: 20-0558706

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

LIZABETH F. CALVO, P.A.  
328 CRANDON BLVD, STE 226  
KEY BISCAYNE, FL 33149 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

## MANAGING MEMBERS/MEMBERS:

Title: MGR ( ) Delete  
Name: CIANO, PABLO  
Address: 300 WOODCREST RD.  
City-St-Zip: KEY BISCAYNE, FL 33149

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition  
Name: CIANO, PABLO  
Address: 600 GRAPETEE DR. APT0 4GN  
City-St-Zip: KEY BISCAYNE, FL 33149

Title: MGR ( ) Change (X) Addition  
Name: ROMAN, CESAR  
Address: 265 GRAPETREE DR. # 118  
City-St-Zip: KEY BISCAYNE, FL 33148

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: CESAR ROMAN

MGR

04/05/2005

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date