

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000055584

**FILED**  
**Apr 22, 2011**  
**Secretary of State**

**Entity Name:** PAN AMERICAN STAFFING, LLC

**Current Principal Place of Business:**

1011 SHOTGUN RD.  
SUNRISE, FL 33326

**New Principal Place of Business:**

**Current Mailing Address:**

1011 SHOTGUN RD.  
SUNRISE, FL 33326

**New Mailing Address:**

**FEI Number:**

**FEI Number Applied For (X)**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

RESTREPO, FERNAN  
1011 SHOTGUN RD.  
SUNRISE, FL 33326 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/MANAGERS:**

**Title:** MGR  
**Name:** RESTREPO, NORMA  
**Address:** 1365 VICTORIA ISLE DR.  
**City-St-Zip:** WESTON, FL 33326

**Title:** MGRM  
**Name:** LEVINE, KRISTA  
**Address:** 1011 SHOTGUN RD  
**City-St-Zip:** SUNRISE, FL 33326

**Title:** MGRM  
**Name:** RESTREPO, FERNAN  
**Address:** 1011 SHOTGUN RD.  
**City-St-Zip:** SUNRISE, FL 33326

I hereby 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:** FERNAN RESTREPO

MGR

04/22/2011

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