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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

FILED

Mar 26 1998 8:00am

Sandra B. Mortham

ANNUAL REPORT 1998		Secretary of State DIVISION OF CORPORATIONS		Secretary of State	
•	MENT # MO44	` '			
PAN-AT	tlantic export & impo	RT, INC.			
Principal Plac	ce of Business	Mailing Address			0.010 0.001 0.001 0.001 0.001 10.00
7252 NW 91 ST 7252 NW 91 ST MIAMI FL 33122 US US					
				DO NOT WRITE IN THIS SPACE	
000		03		3. Date Incorporated or Qualified	
				08/28/1984	
2. Principal Place of Business		2a. Mailing Address		4. FEI Number	Applied For
Suite, Apt. #, etc.		Suite, Apt. #, etc.		59-2440950	Not Applicable \$8.75 Additional
22	·	27		5. Certificate of Status Desired	Fee Required
City & Stat	te	City & State		6. Election Campaign Financing	\$5.00 May Be
Zip	Country	28 Zip	Country	Trust Fund Contribution	Added to Fees
24	25		30	 This corporation owes or has paid the Personal Property Tax due June 30. 	Yes No
	g. Name and Address of Curr			10. Name and Address of New Registe	red Agent
	GA, MANUEL A.		81 Name		
6717 SW 127 PLACE			82 Street Add	ress (P.O. Box Number is Not Acceptable)	
MV	AMI FL 33186		83		
			64 City		FL 85 Zip Code
11, Pursuant	to the provisions of Sections 607.0	502 and 607.1508, Florida Statute	es, the above-named cor	poration submits this statement for the purporation's board of directors. I hereby accept the	se of changing its registered
agent. La	registered agent, or both, in the Sta am familiar with, and accept the obl	igations of, Section 607.0505, Flo	rida Statutes.	anon's board or directors. Thereby accept the	appointment as registered
SIGNATURE	Signature typed or printed name of registered a	(NOTE	.: Registered Agent signature requ	ired when reinstatind)	Tr
12.		ND DIRECTORS	13,	ADDITIONS/CHANGES TO OFFICERS	
TITLE	PST	☐ DELETE	1.1 TITLE		Change Addition
NAME	VEGA, BENIGNO A.		1.2 NAME		
STREET ADDRESS	7421 SW 139 LANE		1.3 STREET ADDRESS		
CITY-ST-ZIP TITLE	MIAMI FL VS	DELETE	1.4 CITY-ST-ZIP 2.1 TITLE		Change Addition
NAME	VEGA, MANUEL A.		2.2 NAME		E change E hadridh
STREET ADDRESS	6717 SW 127 PLACE		2.3 STREET ADDRESS		
CITY-ST-ZIP	MIAMI FL 33183		2. 4 CITY - \$1 - ZIP		
TITLE		☐ DELETE	3.1 TITLE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP TITLE		DELETE	3.4. CITY-ST-ZIP 4.1 TITLE		Change Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE		☐ DELĒTE	5.1 TITLE		Change Addition
NAME STREET ANNAESS			5.2 NAME		
STREET ADDRESS CITY-ST-ZIP			5.3 STREET ADDRESS 5.4 City-St-Zip		1
TITLE		DELETE	6.1 TITLE		Change Addition
NAME			6.2 NAME		Į
STREET ADDRESS		N	6.3 STREET ADDRESS		İ

14. Thereby certify that the information supplied with this filing loss 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 officer or director of the corporation or the receiver or liustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

2-19-9X