

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
May 15, 2002 8:00 am
Secretary of State

05-15-2002 90062 048 ***150.00

DOCUMENT # M 69365

1. Entity Name

PANAM INC.

DO NOT WRITE IN THIS SPACE

659202

2. Principal Place of Business

PAT'S GROCERY

3. Mailing Address

PAT'S GROCERY

Suite, Apt. #, etc.

Suite, Apt. #, etc.

4091 BAINBRIDGE HWY

4091 BAINBRIDGE HWY

City & State

QUINCY FL

City & State

QUINCY FL

Zip

32352

Country

GAZSDEN

Zip

32352

Country

GAZSDEN

4. FEI Number

59-2873825

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name

PATEL VASUDEO B

Street Address (P.O. Box Number is Not Acceptable)

114 JACK DR

City

QUINCY

FL

Zip Code

32352

**DO NOT WRITE
IN THIS SPACE**

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.

SIGNATURE

VASUDEO PATEL VPT

(NOTE: Registered Agent signature required when reinstating)

4/20/02

9. This corporation is eligible to satisfy its Intangible

Tax filing requirement and elects to do so.

(See criteria on back)

☐

January 1 - May 1 Fee is \$150.00

After May 1 Fee is \$550.00

Amended UBR is \$61.25

Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution.

☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PS
PRADIP PATEL
1733 BEAVER CREEK DR
HAYANA FL 32333-4403

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VPT
VASUDEO PATEL
114 JACK DR
QUINCY FL 32352

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

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IN THIS SPACE**

CR2E034B (12/01)

13. 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 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 11 or on an attachment with an address, with all other like empowered.

SIGNATURE:

VASUDEO PATEL (V.P.T)

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/20/02

Date

(850) 875-4721

Daytime Phone #