

2nd and ^{*} File on or before Sept. 30, 1998 or Limited Liability Company will be
FINAL NOTICE: dissolved. If dissolved, minimum amount due to reinstate: \$688.75

LIMITED LIABILITY COMPANY
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

98 JUL 27 PM 1:10

FILING FEE
\$ 588.75
Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee + \$400.00 Late Fee
Make Check Payable To: FLORIDA DEPARTMENT OF STATE

1. Name and Mailing Address
of Limited Liability Company

DOCUMENT # M97000000759

PAN AMERICAN INFORMATION SERVICES LLC
9737 N SPRINGS WAY
CORAL SPRINGS FL 33076

1a. Principal Place of Business Address

9737 N SPRINGS WAY
CORAL SPRINGS FL 33076

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

2a. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

3. Date Organized or Qualified

11/17/1997

4. FEI Number

65-0747401

3a. State of Formation

DE

☐ Applied For

☐ Not Applicable

5. Date of Last Report

6. Certificate of Status Desired

\$8.75 Additional Fee Required ☐

7. Name and Address of Current Registered Agent

8. Name and Address of New Registered Agent/Office

ELIAS, LAWRENCE
9737 N SPRINGS WAY
CORAL SPRINGS FL 33076

Name

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

Suite, Apt. #, etc.

City

FL

Zip Code

9. Pursuant to the provisions of Sections 608.416 and 608.508, Florida Statutes, the above-named limited liability company submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by affirmative vote of a majority of the members. I hereby accept the appointment as registered agent, and accept the obligations.

SIGNATURE

DATE

(If appointed Agent Accepting Appointment) (NOT: Registered Agent signature required when reinstating)

10. Title

Managing Members/Managers

Business Street Address

City, State and Zip Code

MGR ELIAS, LAWRENCE

9737 N SPRINGS WAY

CORAL SPRINGS FL

MGR ELIAS, KATHLEEN

9737 N SPRINGS WAY

CORAL SPRINGS FL

11. I do 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 the annual report is true and accurate and that my 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; and that my name appears in Block 10, or on an attachment with an address.

SIGNATURE:

Lawrence Elias

LAWRENCE ELIAS 7/23/98

954-340-6765

(Signature and Title of Registered Agent, Officer, Managing Member or Manager)

Date

Daytime Phone #

Suite 381
4691 N. University Drive
Coral Springs, Florida 33067
(954) 340-6765
(888) 882-6265

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Pan American Information Services

July 23, 1998

Sandra B. Mortham
Secretary of State
Division of Corporations
Florida Department of State
P.O. Box 6327
Tallahassee, Fl. 32314

Dear Ms. Mortham:

I hereby affirm that I received no other copy of my renewal of my company's registration except the copy enclosed.

I am therefore enclosing my filing fee less the late fee as follows:

Annual Report \$100
Corporation Supplemental Fee \$88.75
Total \$188.75

Sincerely,



Lawrence Elias
Vice-President-Sales



Marc A. Ramer
MY COMMISSION # CC494808
September 11, 1999
BONDED THRU TROY FAIN INSURANCE, INC.



Marc A. Ramer
MY COMMISSION # CC494808 EXPIRES
September 11, 1999
BONDED THRU TROY FAIN INSURANCE, INC.

Always Guaranteed ...On-Time, On-Budget!

Marc A. Ramer
7/23/98