

File on or before May 1, 1999 or Limited Liability Company will be subject to a \$ 400.00 LATE FEE.

LIMITED LIABILITY COMPANY
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED

99 AUG 26 PM 12:22

SECRETARY OF STATE
TALLAHASSEE FLORIDA

FILING FEE \$ 188.75 Annual Report \$100.00 + \$88.75 Corporation Supplemental 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

2a. Mailing Address

3. Date Organized or Qualified

3a. State of Formation

Suite, Apt. #, etc.

Suite, Apt. #, etc.

11/17/1997

FLORIDA

City & State

City & State

4. FEI Number

650-74-7401

☐ Applied For

☐ Not Applicable

Zip

Country

Zip

Country

5. Date of Last Report

FIRST REPORT

6. Certificate of Status Desired

☒ Active ☐ Inactive ☐ Revoked

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)

800002977608--7

Suite, Apt. #, etc.

09/02/99--01097--003

***588.75 ***588.75

City

Zip Code

FL

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

Lawrence Elias

DATE

7/4/99

(Registered Agent Accepting Appointment) (NOTE: Registered Agent signatures required when reinstating)

10. Title

Managing Members/Managers

Business Street Address

City, State and Zip Code

MGR
MGR

LAWRENCE ELIAS
KATHLEEN ELIAS

9737 N. SPRINGS WAY
9737 N. SPRINGS WAY

CORAL SPRINGS, FL. 33076
CORAL SPRINGS, FL. 33076

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 this 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

Date

7/4/99 954-752-3747

Daytime Phone #

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER