

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 28, 2004 8:00 am
Secretary of State

04-28-2004 90278 018 ****70.00

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1. Entity Name
**ASOCIACION PANAMENO-AMERICANA DE ASISTENCIA
SOCIAL, INC.**



Principal Place of Business

**6405 NW 36 STREET
228
MIAMI, FL 33156 US**

Mailing Address

**6405 NW 36 STREET
228
MIAMI, FL 33156 US**

54043833



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

04242004 Chg-NP CR2E037 (10/03)

4. FEI Number
65-0709498

Applied For
Not Applicable

5. Certificate of Status Desired ☒ **\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**MIDDLETON, SANDRA
6405 NW 36 STREET
228
MIAMI, FL 33156**

Name
IRMA GRIMALDO ENDARA

Street Address (P.O. Box Number is Not Acceptable)
6405 NW 36 STREET # 228

MIAMI

City

FL Zip Code
33156

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Sandra B. Endara
Signature, typed or printed name of registered agent and title if applicable.
PRESIDENT

(NOTE: Registered Agent signature required when reinstating)

DATE

April 24, 2004

**Filing Fee is \$61.25
Due by May 1, 2004**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

**Make check payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE * PD ☒ Delete
NAME MIDDLETON, SANDRA
STREET ADDRESS 11165 NW 7 ST #203
CITY-ST-ZIP MIAMI, FL 331723600

TITLE PD ☒ Change ☐ Addition
NAME IRMA GRIMALDO ENDARA
STREET ADDRESS 9814 S.W. 133 CT.
CITY-ST-ZIP MIAMI, FL 33186

TITLE VD ☒ Delete
NAME ENDARA, IRMA
STREET ADDRESS 9814 SW 133 CT
CITY-ST-ZIP MIAMI, FL 33186

TITLE VD ☒ Change ☐ Addition
NAME LIGIA G. HALPHEN
STREET ADDRESS 15625 S.W. 47 TER
CITY-ST-ZIP MIAMI, FL 33185

TITLE D ☒ Delete
NAME TUNON LOPEZ, HERMELINDA
STREET ADDRESS 6899 W 36 AVENUE #204
CITY-ST-ZIP HIALEAH, FL 33018/

TITLE VD ☒ Change ☐ Addition
NAME MIGDALIAH JUAREZ
STREET ADDRESS 6865 GIENNEAGIE DR.
CITY-ST-ZIP MIAMI LAKES, FL 33014

TITLE SD ☒ Delete
NAME PEREZ, ELIA A
STREET ADDRESS 9849 SW 117 PLACE
CITY-ST-ZIP MIAMI, FL 33186

TITLE S ☒ Change ☐ Addition
NAME ROXANNA RIBA
STREET ADDRESS 7010 N.W. 50 ST.
CITY-ST-ZIP MIAMI, FL 33166

TITLE TD ☒ Delete
NAME NOEL, BEATRICE M
STREET ADDRESS 11111 BISCAYNE BLVD T2#1221-
CITY-ST-ZIP MIAMI, FL 33181

TITLE T ☒ Change ☐ Addition
NAME DUBIA ALAMEDA
STREET ADDRESS 7225 S.W. 128 CT
CITY-ST-ZIP MIAMI, FL 33183

TITLE D ☒ Delete
NAME OATES, JENNY
STREET ADDRESS 7901 SW 144 ST
CITY-ST-ZIP MIAMI, FL 33158

TITLE D ☒ Change ☐ Addition
NAME MARIA FLORES
STREET ADDRESS 501 S.W. 42 AVE. APT 3
CITY-ST-ZIP CORAL GABLES, FL 33134

12. 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Sandra B. Endara IRMA G. ENDARA
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04/24/04
Date

305-752-9277
Daytime Phone #