

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**May 01, 2006 8:00 am**  
**Secretary of State**

05-01-2006 90313 022 \*\*\*\*61.25

**DOCUMENT # N96000005861**

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**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

**65-0709498**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional  
Fee Required**

1st MOORE

CR2E037 (10/05)



6. Name and Address of Current Registered Agent

**LOPEZ, EMILSA  
400 SW 34TH AVENUE  
MIAMI FL 33135**

7. Name and Address of New Registered Agent

Name

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

City

**FL**

Zip Code

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

Signature typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent Signature required when re-registering)

DATE

**FILE NOW: FEE IS \$61.25  
Due By May 1, 2006**

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

TITLE PD ☐ Delete  
NAME LOPEZ, EMILSA  
STREET ADDRESS 6405 NW 36TH STREET, #228  
CITY-ST-ZIP MIAMI FL 33156

TITLE VPD ☐ Delete  
NAME WATERMAN, ELEONOR  
STREET ADDRESS 6405 NW 36TH STREET, #228  
CITY-ST-ZIP MIAMI FL 33156

TITLE VPPR ☐ Delete  
NAME LOPEZ, AMY  
STREET ADDRESS 6405 NW 36TH STREET, #228  
CITY-ST-ZIP MIAMI FL 33156

TITLE TD ☐ Delete  
NAME BARROCAS, MARITZA  
STREET ADDRESS 6405 NW 36TH STREET, #228  
CITY-ST-ZIP MIAMI FL 33156

TITLE AT ☒ Delete  
NAME ENDARA, ANAMARIA  
STREET ADDRESS 6405 NW 36TH STREET, #228  
CITY-ST-ZIP MIAMI FL 33156

TITLE SD ☒ Delete  
NAME HORMECHEA, MIRNA  
STREET ADDRESS 6405 NW 36TH STREET, #228  
CITY-ST-ZIP MIAMI FL 33156

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4/19/06 (305) 529-9979