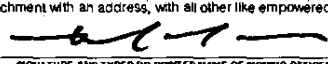


FILED
Apr 30, 2003 8:00 am
Secretary of State

04-30-2003 90132 023 ***158.75

2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P00000088572			
1. Entity Name PANGEA GROUP INC.			
Principal Place of Business 2750 S.W. 87TH AVENUE SUITE 201 MIAMI, FL 33165		Mailing Address 2750 S.W. 87TH AVENUE SUITE 201 MIAMI, FL 33165	
2. Principal Place of Business 8550 W Flagler St. Suite, Apt. #, etc. #109		3. Mailing Address 8550 W Flagler St. Suite, Apt. #, etc. #109	
City & State Miami, FL		City & State Miami, FL	
Zip 33144		Country USA	
4. FEI Number 65-1043597		Applied For Not Applicable	
5. Certificate of Status Desired ✓		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent LAGOS, DOUGLAS 14445 S.W. 167TH TERRACE MIAMI, FL 33177		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number Is Not Acceptable) 8550 W Flagler St #109 City Miami FL Zip Code 33144	
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:  DATE: 4/15/03 (NOTE: Registered Agent's signature required when existing)			
FILE NOW!!!! FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of State		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP PD LAGOS, DOUGLAS 14445 S.W. 167TH TERRACE MIAMI, FL 33177		TITLE NAME STREET ADDRESS CITY-ST-ZIP PD Lagos, Douglas 8550 W Flagler St. #109 Miami, FL 33144	
TITLE NAME STREET ADDRESS CITY-ST-ZIP D GONZALEZ, JULIO 13208 SW 131 ST MIAMI, FL 33186		TITLE NAME STREET ADDRESS CITY-ST-ZIP D GONZALEZ, JULIO 13208 SW 131 ST MIAMI, FL 33186	
TITLE NAME STREET ADDRESS CITY-ST-ZIP D SCHMIDT, GIOVANNA 8841 NW 189 TERRACE MIAMI, FL 33018		TITLE NAME STREET ADDRESS CITY-ST-ZIP D SCHMIDT, GIOVANNA 8841 NW 189 TERRACE MIAMI, FL 33018	
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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 607, 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: 		4/15/03 305-223-9820	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date Daytime Phone #	

CR2034 (10/02)