FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
May 03, 2002 8:00 am
Secretary of State
05-03-2002 90149 001 *****8.75
05-03-2002 90149 002 ***150.00

DOCUMENT # P01000031179

1. Entity Name
NEW PANDA ENTERPRISES COMPANY

DO NOT WRITE IN THIS SPACE

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
2780 N.E. 183 St.	2780 N.E. 183 St.
Suite, Apt. #, etc. 1004-C	Suite, Apt. #, etc. 1004-C
City & State AVENTURA - FL.	City & State AVENTURA - FL.
Zip 33160 Country U.S.A.	Zip 33160 Country U.S.A.

4. FEI Number 65-1086193 ☐ Applied For ☐ Not Applicable

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

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent

Name MERCEDES Judith MOLJO

Street Address (P.O. Box Number is Not Acceptable) 2780 N.E. 183 St # 1004-C

City AVENTURA **FL** Zip Code 33160

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.

SIGNATURE Mercedes Moljo PRESIDENT 04-22-2002
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☑

January 1 - May 1 Fee is $150.00
After May 1, Fee is $550.00
Amended UBR is $61.25
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE	PRESIDENT
NAME	MERCEDES Judith MOLJO
STREET ADDRESS	2780 N.E. 183 St. # 1004-C
CITY-ST-ZIP	AVENTURA - FL. 33160
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
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TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

CR2E034B (12/01)

13. 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 11 or on an attachment with an address, with all other like empowered.

SIGNATURE: Mercedes Moljo - MERCEDES Judith MOLJO 04-22-02 305-935-4601
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

Attachment
DOC#P0160023179

Return this part with any correspondence
so we may identify your account. Please
correct any errors in your name or address.

CP 575 G

0716820350

Your Telephone Number
(305) 935-4601

Best Time to Call
9AM TO 6PM

DATE OF THIS NOTICE: 04-02-2001
EMPLOYER IDENTIFICATION NUMBER: 65-1086193
FORM: SS-4 (TELE-TIN)

INTERNAL REVENUE SERVICE
ATLANTA GA 39901

2780 NE 183 St. # 1004-C
AVENTURA - FL - 33160

NEW PANDA ENTERPRISES
1900 S TREASURE DR APT PHA
NORTH BAY VILLAGE FL 33141

Form **8822**
(Rev. Dec. 2001)
Department of the Treasury
Internal Revenue Service

Change of Address

▶ Please type or print.
▶ See instructions on back. ▶ Do not attach this form to your return.

OMB No. 1545-1163

Part I Complete This Part To Change Your Home Mailing Address

Check **all** boxes this change affects:

1 ☐ Individual income tax returns (Forms 1040, 1040A, 1040EZ, TeleFile, 1040NR, etc.)
▶ If your last return was a joint return and you are now establishing a residence separate from the spouse with whom you filed that return, check here . . . . . ▶ ☐

2 ☐ Gift, estate, or generation-skipping transfer tax returns (Forms 706, 709, etc.)
▶ For Forms 706 and 706-NA, enter the decedent's name and social security number below.

▶ Decedent's name ▶ Social security number

3a Your name (first name, initial, and last name)	3b Your social security number
MERCEDES Judith MOLJO	590 16 4188
4a Spouse's name (first name, initial, and last name)	**4b Spouse's social security number**
ISRAEL MOLJO.	130 28 7363

5 **Prior name(s).** See instructions.

6a Old address (no., street, city or town, state, and ZIP code). If a P.O. box or foreign address, see instructions.	Apt. no.
1900 South TREASURE Dr. - NORTH BAY VILLAGE - FL. 33141 33140	P.H-10'A'
6b Spouse's old address, if different from line 6a (no., street, city or town, state, and ZIP code). If a P.O. box or foreign address, see instructions.	Apt. no.
SAME AS ABOVE	
7 New address (no., street, city or town, state, and ZIP code). If a P.O. box or foreign address, see instructions.	Apt. no.
2780 N.E. 183 St. AVENTURA - FL. 33160	1004-C

Part II Complete This Part To Change Your Business Mailing Address or Business Location

Check **all** boxes this change affects:

8 ☑ Employment, excise, income, and other business returns (Forms 720, 940, 940-EZ, 941, 990, 1041, 1065, 1120, etc.)
9 ☑ Employee plan returns (Forms 5500, 5500-EZ, etc.).
10 ☑ Business location

11a Business name	11b Employer identification number
NEW PANDA ENTERPRISES Company	65 1086193
12 Old mailing address (no., street, city or town, state, and ZIP code). If a P.O. box or foreign address, see instructions.	Room or suite no.
1900 South TREASURE Dr. N. BAY VILLAGE FL. 33141	PH. 10 'A'
13 New mailing address (no., street, city or town, state, and ZIP code). If a P.O. box or foreign address, see instructions.	Room or suite no.
2780 NE 183 St. AVENTURA - FL - 33160	1004-C
14 New business location (no., street, city or town, state, and ZIP code). If a foreign address, see instructions.	Room or suite no.
2780 NE 183 St. AVENTURA - FL - 33160	1004-C

Part III Signature

Daytime telephone number of person to contact (optional) ▶ (305) 935-4601

Sign Here

Your signature: Mercedes Molljo — Date: 04-22-02
If joint return, spouse's signature: Israel Molljo — Date: 04-22-02

▶ Mercedes Molljo — 04-22-02
If Part II completed, signature of owner, officer, or representative — Date

▶ President
Title

For Privacy Act and Paperwork Reduction Act Notice, see back of form. Cat. No. 12081V Form **8822** (Rev. 12-2001)