

FILED
Mar 17, 2003 8:00 am
Secretary of State

03-17-2003 91096 013 ***160.00

**2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # P02000014323

1. Entity Name
PAMAR, INC.



90054462

Principal Place of Business
2700 N. MILITARY TRAIL
SUITE 100
BOCA RATON, FL 33431

Mailing Address
2700 N. MILITARY TRAIL
SUITE 100
BOCA RATON, FL 33431

2. Principal Place of Business
110 PINEHURST LN
Suite, Apt. #, etc.

3. Mailing Address
110 PINEHURST LN
Suite, Apt. #, etc.



☒ CHECK HERE IF MAKING CHANGES

City & State
BOCA RATON, FL
Zip
33431
Country
USA

City & State
BOCA RATON, FL
Zip
33431
Country
USA

4. FEI Number
41-2026688
Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent
PAEZ, ANTONIO SR.
110 PINEHURST LANE
BOCA RATON, FL 33431
EIN: 41-2026688

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 *Ch. V. P.* DATE **3/9/03**
Signature, must be printed name of registered agent and not a corporation (NOTE: Registered Agent's signature required when removing)

9. Election Campaign Financing - ☐ \$5.00 May Be Added to Fees
Trust Fund Contribution.

10. OFFICERS AND DIRECTORS				11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11			
TITLE	P	☐ Delete		TITLE		☐ Change	☐ Addition
NAME	PAEZ, ANTONIO SR.			NAME			
STREET ADDRESS	110 PINEHURST LANE			STREET ADDRESS			
CITY - ST - ZIP	BOCA RATON, FL 33431			CITY - ST - ZIP			
TITLE	V	☐ Delete		TITLE		☐ Change	☐ Addition
NAME	PAEZ, RUTH M			NAME			
STREET ADDRESS	110 PINEHURST LANE			STREET ADDRESS			
CITY - ST - ZIP	BOCA RATON, FL 33431			CITY - ST - ZIP			
TITLE	S	☐ Delete		TITLE		☐ Change	☐ Addition
NAME	MICHELIN, LOUISA P			NAME			
STREET ADDRESS	6268 PRINCETON WAY			STREET ADDRESS			
CITY - ST - ZIP	BOCA RATON, FL 33496			CITY - ST - ZIP			
TITLE	D	☐ Delete		TITLE		☐ Change	☐ Addition
NAME	NEIL, VICTORIA P			NAME			
STREET ADDRESS	227 N.W. 7TH STREET			STREET ADDRESS			
CITY - ST - ZIP	BOCA RATON, FL 33432			CITY - ST - ZIP			
TITLE		☐ Delete		TITLE		☐ Change	☐ Addition
NAME				NAME			
STREET ADDRESS				STREET ADDRESS			
CITY - ST - ZIP				CITY - ST - ZIP			
TITLE		☐ Delete		TITLE		☐ Change	☐ Addition
NAME				NAME			
STREET ADDRESS				STREET ADDRESS			
CITY - ST - ZIP				CITY - ST - ZIP			

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 reports 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 information.

SIGNATURE: *Ch. V. P.* DATE **3/9/03** **561 368 9985**
SIGNATURE AND TITLE OF PERSON SIGNING OFFICIAL OR DIRECTOR