FILED May 02, 2003 8:00 am Secretary of State

05-02-2003 90736 023 ***150.00

DOCUMENT # P02000044249

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

1. Entity Name

PANAMERSA CORPORATION

						1	THE STATE OF THE S						
Principal Place of Business 1963 10TH AVENUE NORTH LAKE WORTH FL 33461			Mailing Address 1963 10TH AVENUE NORTH LAKE WORTH FL 33461							 	11 44 11 44 14 4	61611 61616 1161) 11112 (111 176)
2. Principal F	Place of Busir	ness	3. Mailing Address										
Suite, Apt. #, etc.			Suite, Apt. #, etc.					CHECK HERE IF MAKING CHANGES					
City & State			City & State					4. FEI Number Applied For Not Applicable					
Zip Country			Zip C			ountry			ertificate of S			\$8.75 A	dditional
	6Name	and Address of Current	Registere	d Agent	·	l ———	<u></u>	7. Na	ame and Add	Iress of Nev	v Registere	d Agent	
						Name				1	<u></u>		
Freiter, 1963 10Th	kuri j Havenue i	NORTH					Street Address (P.O. Box Number is Not Acceptable)						
LAKE WORTH FL 33461													
						City	<u></u>				F	l	
	e named entit tions of regist	y submits this statement fo ered agent.	r the purp	ose of changing its	registere	ed office o	r registered	d ager	nt, or both, in	the State of	Florida. I ar	n familiar witl	h, and accept
SIGNATURE	Signature, typed	or printed name of registered agent	and title if app	dicable. (NOT	E: Registere	d Agent signal	ure required wh	hen rein	nstating)		DATE	. <u></u>	
. F	ILE NOW!	! FEE IS \$150.00						Ţ	G Floation	n Campaign	Einanoina		00
	• .)3 Fee will be \$550.00 o Florida Department o	1							and Contribu	-		.00 May Be ed to Fees
10.		OFFICERS AND	DIRECTO	RS	11.				DITIONS/CHA		FFICERS AN	ND DIRECTO	RS IN 11
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NAME	FREITER,	Kurt j			NAM	E							
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CITY-ST-ZIP	LAKE WOI	RTH FL 33461 *			CITY	-ST-ZIP							
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NAME	AUSLANDI	er, jeff h			NAM	E	•	ſ				-	
STREET ADDRESS	1963 10TH	AVENUE NORTH			STRE	ET ADDRESS							
CITY-ST-ZIP	LAKE WO	RTH FL 33461			CITY	-ST-ZIP				1			
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NAME	METT, R. I	MICHAEL			NAM	Ē	[* /	1		•	
STREET ADDRESS		I AVENUE NORTH			STRE	et address	Ĭ.						Í
CITY-ST-ZIP	LAKE WOR	RTH FL 33461			CITY	-ST-ZIP							
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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: