## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## Feb 09, 2004 8:00 am DOCUMENT # P03000020157 Secretary of State 1. Entity Name 02-09-2004 90053 046 \*\*\*150.00 PAN AMERICAN DEVELOPMENT GROUP, INC. Principal Place of Business Mailing Address 2400 W. 84TH ST., SUITE 11 2400 W. 84TH ST., SUITE 11 HIALEAH, FL 33016 HIALEAH, FL 33016 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 01282004 CR2E034 (10/03) 4. FEI Number 48-130/657 City & State City & State Applied For Not Applicable Country \$8.75 Additional Zip Country Zip 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent BELL, RICHARD L Street Address (P.O. Box Number is Not Acceptable) 4520 SW 148TH TERR. MIRAMAR, FL 33026 13856 NW 1455T. atement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept 8. The above named entity submits th the obligations of registered as Kichard Boll President SIGNATURE (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 Added to Fees Trust Fund Contribution. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 10. Change TITLE TITLE Delete BELL, RICHARD L NAME NAME 13856NW 14th ST. STREET ADDRESS 4520 SW 148TH TERR. STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MIRAMAR, FL 33026 ☐ Addition ☐ Delete TITLE TITLE BELL, JOHN E NAME NAME STREET ADDRESS 1161 NW 78TH AVE. STREET ADDRESS CITY-ST-ZIP PLANTATION, FL 33322 CITY-ST-ZIP ☐ Change Addition SD TITLE ☐ Defete BELL, MIRNA ALICIA L NAME NAME: 1161 NW 78TH AVE. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP PLANTATION, FL 33322 Change Addition ☐ Delete TITLE TITLE BELL, EVELYN G NAME NAME 13956 NW144 STREET STREET ADDRESS STREET ADDRESS 4520 SW 148TH TERR. Rembroke Pino: CITY-ST-ZIP MIRAMAR, FL 33026 CITY-ST-ZIP TITLE Change Addition TITLE ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Addition ☐ Change ☐ Delete NAME യെ സംവം 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 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 embedding the 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.

FILED