## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER

## DOCUMENT # P03000020157

1. Entity Name

PAN AMERICAN DEVELOPMENT GROUP, INC.



FILED
Jan 18, 2005 08:00 AM
Secretary of State

Principal Place of Business

2400 W. 84TH ST., SUITE 11 HIALEAH, FL 33016

Mailing Address

2400 W. 84TH ST., SUITE 11 HIALEAH, FL 33016



01122005

No Chg-P

CR2E034 (10/03)

4. FEI Number 48-1301657 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

		-45.0						
6.	Name	and a	Address	of i	Curre	nt Regi	stered	Agent

BELL, RICHARD L 13856 NW 14TH ST HOLLYWOOD, FL 33028

SIGNATURE:

## DO NOT WRITE IN THIS SPACE

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 Signature, typed or printed name of registered agent and title it applicable. (NOTE Registered Agent signature required when reinstating)  DATE									
	E NOW!!! FEE IS \$150.00 ay 1, 2005 Fee will be \$550.00	Election Campaign Financir     Trust Fund Contribution.	ig 🗆	\$5.00 May Be Added to Fees					
10.	OFFICERS AND DIREC	TORS			-				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD BELL, RICHARD L 13856 NW 14TH ST. PEMBROKE PINES, FL 33028				U000001183705 D1/19/05-80078-012 150.00				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD BELL, JOHN E 1161 NW 78TH AVE. PLANTATION, FL 33322				7.1, 1.2, 2.2				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD BELL, MIRNA ALICIA L 1161 NW 78TH AVE. PLANTATION, FL 33322			DO	NOT WRITE				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD BELL, EVELYN G 13856 NW 14TH STREET PEMBROKE PINES, FL 33028			IN .	THIS SPACE				
THTLE NAME STREET ADDRESS CITY-ST-ZIP									
TITLE NAME STREET ADDRESS 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 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 properties of the empowered.									