

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # P03000020157

1. Entity Name
PAN AMERICAN DEVELOPMENT GROUP, INC.



Principal Place of Business
2400 W. 84TH ST., SUITE 11
HIALEAH, FL 33016

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

DO NOT WRITE IN THIS SPACE

**FILED
Apr 26, 2007 8:00 am
Secretary of State**

04-12-2007 90047 034 ***150.00



02032007 No Chg-P CR2E034 (11/05)

4. FEI Number 48-1301657	Applied For Not Applicable
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5. Certificate of Status Desired	<input type="checkbox"/> \$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent

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

**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 if applicable.

(NOTE: Registered Agent signature required when renewing.)

7/23/07

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution.

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE PD
NAME BELL, RICHARD L
STREET ADDRESS 13856 NW 14TH ST.
CITY-ST-ZIP PEMBROKE PINES, FL 33028

TITLE VD
NAME BELL, JOHN E
STREET ADDRESS 1161 NW 78TH AVE.
CITY-ST-ZIP PLANTATION, FL 33322

TITLE SD
NAME BELL, MIRNA ALICIA L
STREET ADDRESS 1161 NW 78TH AVE.
CITY-ST-ZIP PLANTATION, FL 33322

TITLE TD
NAME BELL, EVELYN G
STREET ADDRESS 13856 NW 14TH STREET
CITY-ST-ZIP PEMBROKE PINES, FL 33028

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/23/07 305-523-8872

Date

Daytime Phone #