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## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # **P34009** 1. Corporation Name

PANAGO	ON SERVICES INC. OF CAP	'E CAI	NAVEHAL, FL								
Principal Place	e of Business	Ma	ailing Address					##	94911 B1811 (881		
7777 N. WICKHAM RD #14 MELBOURNE FL 32940		1645 WESTPORT ROAD MERRITT ISLAND FL 32942-5653 US			DO NOT WRITE IN THIS SPACE						
US !							3. Date Incorporated or Qualifed				
2 Principal P	lace of Business	22	Mailing Address				05/20/1991 4. FEI Number	An	plied For	ļ	
21		26	¬				59-3042514	1 <del>   `</del>	t Applicable	Ì	
Suite, Apt. #, etc.		1201	Suite, Apt. #, etc.				_	\$8.75	Additional		
22		27	27				5. Certifcate of Status Desired	Fee Re	equired		
City & State	e		_City_& State			استجينه	6.=Election:Campaign:Financing	•	May Be-	نخا	
23		28					Trust Fund Contribution	Added	to Fees	ļ	
Zip	Country	<u> </u>	Zip	Count	ry		8. This corporation owes the current year Inta	ingible □Yes	⊠N <sub>0</sub>		
24	25	29		30			Personal Property Tax.  10. Name and Address of New Registered A		≥ NO	┨	
!	9. Name and Address of Curren	it Kegis	tered Agent	8	1 Name	<del></del>	10. Haile and Address of New Yoghstorous	1gon.		1	
GRIF	FIN. SUSAN G.			8						-	
1645 WESTPORT RD.						t Addres	dress (P.O. Box Number is Not Acceptable)				
MERRITT ISLAND FL 32952				8	3				<u> </u>	1	
				-	4 0"			loc Zin (	Code	-	
				8	4 City		FL	85 Zip (	Code	l	
								1 1			
l office or re	to the provisions of Sections 607.050 egistered agent, or both, in the State m familiar with, and accept the obliga	of Florid	ia. Such change was aut	horized b	y the cor	d corpor poration	ration submits this statement for the purpose of a board of directors. I hereby accept the appoin	changing its	registered gistered	-	
l office or re	egistered agent, or both, in the State m familiar with, and accept the obliga	of Floric itions of,	la. Such change was aut Section 607.0505, Florid	thorized b da Statute	y the cor es.	poration	ration submits this statement for the purpose of a board of directors. I hereby accept the appoin	changing its	registered gistered		
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CITY-ST-ZIP 14. 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 annual report or supplemental annual 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 of the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or en an attachment with an address, with all other like empowered.

5.3 STREET ADDRESS

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

**SIGNATURE** 

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

TTILE

NAME

☐ DELETE

☐ Change

☐ Addition