2006 FOR PROFIT CORPORATION
ANNUAL REPORT

DOCUMENT # P92000001242

1. Entity Name
THE PANARO WORKSHOP THEATRE COMPANY, INC.

Principal Place of Business	Mailing Address
421 WASHINGTON AVE. MIAMI BEACH, FL 33139 US	P.O. BOX 19-1482 MIAMI BEACH, FL 33119-1482 US

DO NOT WRITE IN THIS SPACE

01072006   No Chg-P   CR2E034 (11/05)

4. FEI Number	Applied For
65-0367998	Not Applicable

5. Certificate of Status Desired ☐   **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

CASTORO, FRANCIS X
2100 HOLLYWOOD BLVD.
HOLLYWOOD, FL 33020

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 reinstating)   DATE

FILE NOW!!! FEE IS $150.00 After May 1, 2006 Fee will be $550.00	**9.** Election Campaign Financing Trust Fund Contribution. ☐	**$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	PDS	
NAME	PANARO, ANNA	U00000382736
STREET ADDRESS	421 WASHINGTON AVE.	01/12/06-80024-024 150.00
CITY-ST-ZIP	MIAMI BEACH, FL	
TITLE	D	
NAME	PUCCIO, THOMAS	
STREET ADDRESS	247 E RIVO ALTO DR	
CITY-ST-ZIP	MIAMI BEACH, FL 33139	
TITLE		
NAME		
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NAME		
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CITY-ST-ZIP		

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: Anna Panaro Anna Panaro   1-9-2006 (305)632-2586

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   Date   Daytime Phone #