

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P92000015321 (2)

1. Corporation Name

PAN AMERICAN LABORATORY INC.



Principal Place of Business

3380 NW 151ST TERRACE
MIAMI FL 33054

Mailing Address

3380 NW 151ST TERRACE
MIAMI FL 33054

3. Date Incorporated or Qualified

12/28/1992

3a. Date of Last Report

03/09/1995

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

25

Country

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

30

Country

4. FEI Number

65-0411586

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

NAVARRO, JESUS
3380 N.W. 151 TERRACE
MIAMI FL 33054

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

(If a new type of or a new firm is required, sign the title of the applicable

(If the Registered Agent signature is required when registering

DATE

12. OFFICERS AND DIRECTORS

12.1

NAME

STREET ADDRESS

CITY-STATE-ZIP

DP
BARRIOS, AMBOSIO
579 EAST 55TH STREET
HIALEAH FL 33012

☐ DELETE

12.2

NAME

STREET ADDRESS

CITY-STATE-ZIP

DT
NAVARRO, JESUS
19800 E. OAKMONT DR.
MIAMI FL 33015

☐ DELETE

12.3

NAME

STREET ADDRESS

CITY-STATE-ZIP

DV
VAZQUEZ, JESUS
4655 PALM AVE., SUITE 128
HIALEAH FL 33012

☐ DELETE

12.4

NAME

STREET ADDRESS

CITY-STATE-ZIP

DS
BELLO, LOUIS
6320 SIMMONS ST
MIAMI LAKES FL 33014

☐ DELETE

12.5

NAME

STREET ADDRESS

CITY-STATE-ZIP

☐ DELETE

12.6

NAME

STREET ADDRESS

CITY-STATE-ZIP

☐ DELETE

12.7

NAME

STREET ADDRESS

CITY-STATE-ZIP

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-STATE-ZIP

☐ Change

☐ Addition

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-STATE-ZIP

☐ Change

☐ Addition

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-STATE-ZIP

☐ Change

☐ Addition

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-STATE-ZIP

☐ Change

☐ Addition

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-STATE-ZIP

☐ Change

☐ Addition

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-STATE-ZIP

☐ Change

☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 or 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 on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/22/96

Date

305-688-1228

Daytime Phone #

CR2E034 (12/95)