## 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

## FILED Apr 15, 1999 8:00 am Secretary of State

04-15-1999 90102 029 \*\*\*150.00

A CORRESPONDI DE CERRO CRIAL ORGAN SANCE RECEL ORGAN SLOSE DICHE LEURS CITER SEIL 1881.

## DOCUMENT # P93000015753

PANAMERICAN ELECTRONICS, INC.

A CONTRACTOR OF THE STATE OF TH	ع <u>جو سيد</u> ، پ ، پ ، د	كالمتحالية والمتحالية		
Principal Place of Business	Mailing Address			681 81111 18391 81168 1111 1881
6118 NW 74TH AVE	6118 NW 74TH AVE			
MIAMI FL 33166	MIAMI FL 33166			
US	US	يا ا	DO NOT WRITE IN THIS S	PACE
,		4/4	3. Date Incorporated or Qualifed	
			03/02/1993	
2. Principal Place of Business	2a. Mailing Address	•	4. FEI Number	Applied For
21	26		65-0389786	Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
22	27		<del></del>	Fee Required
City & State	City & State		6. Election Campaign Financing	\$5.00 May Be
23	28	Country	Trust Fund Contribution	Added to Fees
Zip Country	Zip	Country	8. This corporation owes the current year Intar	ngible ∐Yes □No
24 25	<del></del>	30	Personal Property Tax.  10. Name and Address of New Registered A	
9. Name and Address of Current	Registered Agent	81 Name	TU. Name and Address of New Registered A	gent
SOLANO, FERNANDO		, Italiic		
6118 NW 74TH AVE		82 Street Add	fress (P.O. Box Number is Not Acceptable)	-
MIAMI FL 33166		-		
MIAWI FE 33 100		83		
•		84 City		85 Zip Code
			<u> </u>	
11. Pursuant to the provisions of Sections 607.0500 office or registered agent, or both, in the State agent. I am familiar with and adcept the obligat	2 and 607.1508, Florida Statute	s, the above-named corp	poration submits this statement for the purpose of cl ion's board of directors. I bereby accept the appoint	nanging its registered       ment as registered
agent. I am amiliar with and adeept the obligat	ins of, Section 607.0505, Flor	da Statutes.	0- 05 100	<b>y</b>
SIGNATURE 1000			05 63/49_	
Signature, typed or print to hame of registered agen	· · · · · · · · · · · · · · · · · · ·	Registered Agent signature require		OUDEOTODO IN 40
12. OFFICERS AN		13.	ADDITIONS/CHANGES TO OFFICERS AND	Change Addition
TITLE PV	☐ DELETE	1.1 TITLE		
NAME RUBIANO, ARGEMIRO		1.2 NAME		j
STREET ADDRESS 6118 NW 74TH AVE		1.3 STREET ADDRESS	•	
CITY-ST-ZIP MIAMI FL		1.4 CITY-ST-ZIP		Channe Maddition
TITLE S	☐ DELETE	2.1 TITLE		Change Addition
NAME RUBIANO, LUZ ANGELICA		2.2 NAME		ľ
STREET ADDRESS 6118 NW 74TH AVE		2.3 STREET ADDRESS		
CITY-ST-ZIP MIAMI FL		2. 4 CITY-ST-ZIP		
TITLE   <b>T</b>	☐ DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME RUBIANO, CARMEN ELIZA RUI	Z	3.2 NAME		
STREET ADDRESS 6118 NW 74TH AVE		3.3 STREET ADDRESS		
CITY-ST-ZIP MIAMI FL		3.4. CITY-ST-ZIP		
TITLE	☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME		4. 2 NAME		
STREET ADDRESS		4.3 STREET ADDRESS		
CITY-ST-ZIP		4.4 CITY-ST-ZIP		
TITLE	☐ DELETE	5.1 TITLE	<del></del>	Change Addition
NAME		5.2 NAME		
STREET ADDRESS		5.3 STREET ADDRESS		
1 '		0.00,1422170014200		
CITY-ST-ZIP		5.4 CTY-ST-ZIP		
TITLE	☐ DELETE	1		☐ Change ☐ Addition
<del></del>	☐ DELETE	5.4 C TY-\$T-ZIP		☐ Change ☐ Addition
TITLE	☐ DELETE	5.4 C TY-ST-ZIP 6.1 TI _E		☐ Change ☐ Addition

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 or the receiver of 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, with all other the empowered.

SIGNATURE:

SNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OF DIRECTOR

03-25/44

Daytime Phone #

PEN24 (44 (00)