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FILED  
May 09 1997 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



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

DOCUMENT # P93000030966 (4)

1. Corporation Name

PARDU INVESTMENTS CORPORATION

Principal Place of Business

915 MIDDLE RIVER DRIVE  
SUITE 508  
FT LAUDERDALE FL 33304

Mailing Address

915 MIDDLE RIVER DRIVE  
SUITE 508  
FT LAUDERDALE FL 33304-3500



3. Date Incorporated or Qualified

04/27/1993

3a. Date of Last Report

09/11/1996

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

24 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

29 Country

4. FEI Number

65-0409207

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional

Fee Required

6. Election Campaign Financing

☐

\$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

MOTATIS, GEORGE R  
915 MIDDLE RIVER DR  
SUITE 508  
FT LAUDERDALE FL 33304

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP

DP  
PARDO, SILVIA  
4900 N OCEAN BLVD. #917  
FT. LAUDERDALE FL 33308

☐ DELETE

TITLE NAME STREET ADDRESS CITY-ST-ZIP

DVP  
PARDO, ERNESTO  
4900 N OCEAN BLVD. #917  
FT. LAUDERDALE FL 33308

☐ DELETE

TITLE NAME STREET ADDRESS CITY-ST-ZIP

DT  
PARDO, DIANA  
4900 N. OCEAN BLVD. #917  
FT. LAUDERDALE FL 33308

☐ DELETE

TITLE NAME STREET ADDRESS CITY-ST-ZIP

DS  
PARDO, INES ELVIRA  
4900 N. OCEAN BLVD. #917  
FT. LAUDERDALE FL 33308

☐ DELETE

TITLE NAME STREET ADDRESS CITY-ST-ZIP

DVP  
PARDO, ISABEL  
4900 N. OCEAN BLVD. #917  
FT. LAUDERDALE FL 33308

☐ DELETE

TITLE NAME STREET ADDRESS CITY-ST-ZIP

TITLE NAME STREET ADDRESS CITY-ST-ZIP

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

☐ Change

☐ Addition

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

☐ Change

☐ Addition

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

☐ Change

☐ Addition

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

☐ Change

☐ Addition

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

☐ Change

☐ Addition

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

☐ Change

☐ Addition

14. I do 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 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]* 3/31/97

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CR2E034 (9/96)