

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

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

95 APR 21 PM 4:20

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P93000034358 (0)**

1. Corporation Name

PAN AMERICAN METAL PRODUCTS CO. INC.

Principal Place of Business

**17401 N.W. 2ND AVENUE
MIAMI FL 33169**

Mailing Address

**17401 N.W. 2ND AVENUE
MIAMI FL 33169**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

05/10/1983

3a. Date of Last Report

04/28/1994

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

24

Country

25

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

29

Country

30

4. FEI Number

59-0391195

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**

6. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes

☒ Yes

☐ No

9. Name and Address of Current Registered Agent

**B & C CORPORATE SERVICES INC.
COURT HOUSE CENTER
175 N.W. FIRST AVENUE SUITE 2000
MIAMI FL 33128-9965**

10. Name and Address of New Registered Agent

81 Name **B+C CORPORATE SERVICES, INC.**

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

MIAMI CENTER

83 **201 S. DISCAYNE BLVD., SUITE 3000**

84 City **MIAMI**

FL

85 Zip Code **33181**

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	D
NAME	VAZQUEZ, OMAR A
STREET ADDRESS	17401 N.W. 2ND AVE
CITY - ST - ZIP	MIAMI FL 33169
TITLE	D
NAME	DUCANIS, JOSEPH
STREET ADDRESS	17401 N.W. 2ND AVE.
CITY - ST - ZIP	MIAMI FL 33169
TITLE	D
NAME	DUCANIS, WILLIAM
STREET ADDRESS	17401 N.W. 2ND AVE.
CITY - ST - ZIP	MIAMI FL 33169
TITLE	D
NAME	DUCANIS, PAUL
STREET ADDRESS	17401 N.W. 2ND AVE.
CITY - ST - ZIP	MIAMI FL 33169
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	☐ Change ☐ Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY - ST - ZIP	
2.1 TITLE	☐ Change ☐ Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY - ST - ZIP	
3.1 TITLE	☐ Change ☐ Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY - ST - ZIP	
4.1 TITLE	☐ Change ☐ Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY - ST - ZIP	
5.1 TITLE	☐ Change ☐ Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY - ST - ZIP	
6.1 TITLE	☐ Change ☐ Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY - ST - ZIP	

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 110.07(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:

OMAR A. VAZQUEZ, PRESIDENT

4-13-95

(305) 652-2400