

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

AMENDED 1996
APPROVED
AND
FILED

CORPORATION
ANNUAL REPORT
1995



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

96 NOV 25 AM 10:08

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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DOCUMENT # P93000042084
1. Corporation Name
PANTHER ROAD ASSISTANCE.

Principal Place of Business Mailing Address
14629 SW 104 ST # 404
MIAMI FL 33186.

DO NOT WRITE IN THIS SPACE.

| | |
|---|-----------------------------------|
| 3. Date Incorporated or Qualified 1/93 | 3a. Date of Last Report |
| 4. FEI Number 65-0424420 | Applied For Not Applicable |
| 5. Certificate of Status Desired <input type="checkbox"/> | \$8.75 Additional Fee Required |
| 6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> | \$5.00 May Be Added to Fees |
| 8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No | |

| | |
|---|--|
| 2. Principal Place of Business 21. SAME AS ABOVE. Suite, Apt. #, etc. 22. City & State 23. Zip 24. | 2a. Mailing Address 26. SAME Suite, Apt. #, etc. 27. City & State 28. Zip 29. |
|---|--|

9. Name and Address of Current Registered Agent

GLORIA P. DUQUE
15562 SW 137 PL
MIAMI FL 33177.

10. Name and Address of New Registered Agent

| |
|---|
| 81. Name GLORIA P. GOMEZ. |
| 82. Street Address (P.O. Box Number is Not Acceptable) 10933 SW 146 CT |
| 83. |
| 84. City MIAMI FL 85. Zip Code 33186 |

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 *Gloria P. Gomez*
Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE 11/5/96

| 12. OFFICERS AND DIRECTORS | | | |
|----------------------------|--------------------------|-----------------|-----------------|
| TITLE | NAME | STREET ADDRESS | CITY-ST-ZIP |
| | GLORIA P. DUQUE PRES. | 15562 SW 137 PL | MIAMI FL 33177. |
| | ORLANDO DUQUE VICE PRES. | 15562 SW 137 PL | MIAMI FL 33177 |
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| 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 | | | |
|---|-----------------|--------------------|-----------------|
| 1.1 TITLE | 1.2 NAME | 1.3 STREET ADDRESS | 1.4 CITY-ST-ZIP |
| PRESIDENT | GLORIA P. GOMEZ | 10933 SW 146 CT | MIAMI FL 33186. |
| 2.1 TITLE | 2.2 NAME | 2.3 STREET ADDRESS | 2.4 CITY-ST-ZIP |
| VICE PRESIDENT | FREDDY SANTANA | 10933 SW 146 CT | MIAMI FL 33186. |
| 3.1 TITLE | 3.2 NAME | 3.3 STREET ADDRESS | 3.4 CITY-ST-ZIP |
| | | | |
| 4.1 TITLE | 4.2 NAME | 4.3 STREET ADDRESS | 4.4 CITY-ST-ZIP |
| | | | |
| 5.1 TITLE | 5.2 NAME | 5.3 STREET ADDRESS | 5.4 CITY-ST-ZIP |
| | | | |
| 6.1 TITLE | 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 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: *Gloria Patricia Duque* 11/5/96. (205)
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR