

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

FILED
Mar 18 1996 8:00 am
Secretary of State

DOCUMENT # P94000007347 (5)

1. Corporation Name

PAN EUROPEAN, INC.



Principal Place of Business

**200 EAST ROBINSON STREET
SUITE 500
ORLANDO FL 32801**

Mailing Address

**200 EAST ROBINSON STREET
SUITE 500
ORLANDO FL 32801**

3. Date Incorporated or Qualified
01/31/1994

3a. Date of Last Report
07/28/1995

2. Principal Place of Business

2a. Mailing Address

21 **5054 LATROBE DRIVE**

26 **2600 MAITLAND CENTER PARKWAY**

4. FET Number

Applied For

Not Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 **WINDERMERE**

27 **SUITE 330**

City & State

City & State

FLORIDA

MAITLAND FL

Zip

Country

Zip

Country

24 **34786**

25 **USA**

29 **32751**

30 **USA**

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

10. Name and Address of New Registered Agent

**FLORIDA CORPORATE SUPPORT, INC
200 EAST ROBINSON ST.
SUITE 500
ORLANDO FL 32801**

81 Name

Mrs ~~James~~ LINDA G.T. PARKS

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

JAMES, PARKS, TSCHOPP & WHITCOMB PA

83

SUITE 330, 2600 MAITLAND CENTER PARKWAY

84

MAITLAND,

FL

85 Zip Code

32751

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

LINDA G.T. PARKS, CAA

(NOTE: Registered Agent Signature Required when registering)

3-12-96

DATE

12. OFFICERS AND DIRECTORS

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE
NAME **DP**
STREET ADDRESS **DUNCAN, JAMES J**
CITY - ST - ZIP **5054 LATROBE DR.
WINDERMERE FL 34786**

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