SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997. AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9400036262 (1)

PANAN, INC.

Aug 12 1997 8:00am Secretary of State

FILED

1 MACA						
Principal Place of Business 10800 BISCAYNE BLVD. PENTHOUSE MIAMI FL 33161		Mailing Address 10800 BISCAYNE BLVI PENTHOUSE MIAMI FL 33161	D .		DO NOT WRITE	IN THIS SPACE
US		U\$			 Date Incorporated or Qualified 05/09/1994 	3a. Date of Last Report 06/27/1996
2. Principal Place of Business 21		2a. Mailing Address 26			4. FEI Number 65-0656321	Applied For Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.	27		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State	28		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip 24	Country 25	Z _I p 29	Counti	У	 This corporation owes or has pa Personal Property Tax due June 	30. 🗌 Yes 🛄 No
	9. Name and Address of Cu	rrent Registered Agent			10. Name and Address of New Re	gistered Agent
	AN, NANCY		В	Name		
PE	00 BISCAYNE BLVD. NTHOUSE		8:	2 Street Add	Iress (P.O. Box Number is Not Acceptat	ole)
MIA	MI FL 33161		8	3		
			8	4 City		FL 85 Zip Code
Affico or r	egistered agent, or both, in the S m familiar with, and accept the o	tate of Florida. Such change wi bligations of, Section 607.0505,	as authorized t Florida Statut	oy the corpora	poration submits this statement for the pation's board of directors. I hereby accept	ourpose of changing its registered of the appointment as registered
			NOTE Hegistered A	geni signature requ	ired when reinstaling) ADDITIONS/CHANGES TO OFFICE	
12.	OFFICENS		DELETE 1.1 TITLE		ADDITIONO/OFFIANAZO TO OFFIA	Change Addition
NAME	RYAN, NANCY		1,2 NAM	[-
STREET ADDRESS 10800 BISCAYNE BLVD., PENTHOUSE		Penthouse		ET ADDRESS		
CITY-ST-ZIP MIAMI FL 33161			1.4 CITY	1		
TITLE	DELETE		2.1 TITLE			Change Addition
NAME			2.2 NAM			
STREET ADDRESS			2.3 STRE	ET ADDRESS		•
CITY-ST-ZIP	1		2. 4 CITY	- ST- ZIP		-
TITLE	DELETE		3.1 TITLE			Change Addition
NAME			3.2 NAM	:		
STREET ADDRESS			3.3 STRE	ET ADDRESS		
CITY-ST-ZIP			3.4. CITY	-ST-ZIP		
TITLE	DELETE 4		4.1 TiTLE			Change Addition
NAME			4. 2 NAN	IE		
STREET ADDRESS			4.3 STRE	ET ADDRESS		
CITY-ST-ZIP			4.4 City			Change Addition
TITLE	DELETE		5.1 TITLE			☐ Change ☐ Addition
NAME			5.2 NAM	- 1		
STREET ADDRESS			l l	FT ADDRESS		
CITY-ST-ZIP		Druste	5.4 CITY			Change Addition
TITLE		DELETE	6.1 TITLE	ì		Charge Addition
NAME			6.2 NAM	1		
STREET ADDRESS			6.3 STRE	ET ADDRESS		

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 exporation 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.

8/7/02

1200 700 plant