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

PROFIT CORPORATION ANNUAL REPORT

1996



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # P94

1. Corporation Name

P94000040635 (2)

PAWVAM CORP.

Mailing Address

Principal Place of Business 15400 S.W. 144TH PLACE MIAMI FL 33177

15400 S.W. 144TH PLACE



MIAMI FL 33	••••	MIAMI FL 33177			
					of Last Report 5/01/1995
	lace of Business	2a. Mailing Address	0 10/05	4. FET Number	Applied For
	57 SW 262 ST	26 [323]	2m3632	F 65-0493901	Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
City & State		27			Fee Required
23 Horne	estead tuorida			6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
ສ ^{ະຄ} 3ລ	032 25 USA	Zip	Country USN	8. This corporation has liability for intangible ta	x under s 199.032,
24 00	9. Name and Address of Curren	29 33032 :	80 CL S KI	Florida Statutes Yes No	
	9. Hame and Address of Correl	it negistered Agent	81 Nanie	10. Name and Address of New Registered A	\gent
MARGOLIS, JOHN A					
9040 SUNSET DRIVE, SUITE 40				dress (P.O. Box Number is Not Acceptable)	
MIAMI FL 33173				·	
	2 33 3		63		
			84 City	FI	85 Zip Code
11 Pursuant t	to the provisions of Sections 607 0500	and 607 1509. Florido Statutos	the share and a	FL pration submits this statement for the purpose of char	
Or registor	red agent, or both, in the State of Florid th, and accept the obligations of, Secti	ia. Such change was admonzed	by the corporation's bo	oration submits this statement for the purpose of char ard of directors, I hereby accept the appointment as a	nging its registered office registered agent. I am
SIGNATURE .	Signature, typed or printed name of registered agent		Registered Agent signature requir	red where reinstating: DATE	
12.	OFFICERS AND	DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND	DIRECTORS IN 12
TITLE	WONG DAIR	☐ DELEYE	1 1 TITLE		Change 🔲 Addition
NAME	WONG, PAUL		1 2 NAME		
STREET ADDRESS	15400 S.W. 144TH PLACE MIAMI FL 33177		13 STREET ADDRESS		
CITY - ST - ZIP	MIAMI FL 33177		14 CITY-ST-ZIP		
TITLE		☐ DELETE	2 1 TITLE		Change 🔲 Addition
NAME			2.2 NAME		
STREET ADDRESS			2.3 STREET ADDRESS		
CITY - ST - ZIP			2 4 CHY - S1 - 7IP		
THILF		□ DELETE	3 1 117; £		Change
NAME			3 2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
City Styzie Tille	 	F) http://	34 CITY - \$1 - ZiP		
NAMI.		[] DEFELE	4 1 TIFLE] Change 🔲 Addition
NAMI STREET ADDRESS			4.2 NAME		
			4.3 STREET ADDRESS		
CHTY-ST-ZIP TIDLE		TI DELETE	4.4.0(1) × S1 - Z(F)		1.05
NAME		C) becen	5 1 TITLE	L	Change Addition
SIREE ADDRESS			5 2 NAME		
CITY-ST-ZIP			5.3 STREET ADDRESS		Ì
FITLE		T) DELETE	5.4 CITY - \$T - ZIP 6.1 TITLE		Chases T Adde.
NAMÉ			62 NAME	Li	Change 🔲 Addition
STREET ADDRESS					}
CITY ST-ZIP			6.3 STREET ADDRESS		
	certify that the information supplied w	ith the files is voluntarily funished	6 4 CiTY - ST - ZIP	for the exemption stated in Section 119.07(3)(k), Flori	

14. To hierary 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). Fiorida 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 or block 12 or block 12 or block 13 or block 14 or block 14

SIGNATURE:

PED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR TO COMPANY DIRECTOR

305-357-5683