

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P95000090868

1. Entity Name

PAN AMERICAN COUNCIL, INC.

FILED

00 SEP 14 AM 11:04

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

% LUIS LAUREDO
1221 BRICKELL AVENUE
MIAMI FL 33131

Mailing Address

% LUIS LAUREDO
1221 BRICKELL AVENUE
MIAMI FL 33131

2. Principal Place of Business

Carlos Loumiet

3. Mailing Address

Carlos Loumiet

Suite, Apt. #, etc.

1221 Brickell Ave 21FL

Suite, Apt. #, etc.

1221 Brickell Ave 21FL

City & State

Miami FL 33131

City & State

Miami FL 33131

4. FEI Number

65-0496559

Applied For

Not Applicable

Zip

Country

Zip

Country

33131

Dade

33131

Dade

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

LAUREDO, LUIS
1221 BRICKELL AVENUE
MIAMI FL 33131

7. Name and Address of New Registered Agent

Name

Carlos Loumiet

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

1221 Brickell Ave

Suite 2100

City

Miami

FL

Zip Code
33131

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

Carlos Loumiet

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

FILE NOW!!! FEE IS \$550.00
After SEPTEMBER 13, 2000 Min. will be \$750.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE ☐ Delete
NAME D
STREET ADDRESS LAUREDO, LUIS
CITY-ST-ZIP 1221 BRICKELL AVENUE
MIAMI FL 33131

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition
NAME Carlos Loumiet (D)
STREET ADDRESS 1221 Brickell Ave. Suite 2100
CITY-ST-ZIP Miami FL 33131

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

13. I 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

~~SIGNATURE REQUIRED~~ Carlos Loumiet

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

TS