## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

r Panatlantic

小衛子 多年五日日 三大

P97000003371 (6)

12.98

FILED Apr 27 1998 8:00am Secretary of State



Principal Place of Business Mailing Address						
Principal Place of Business Mailing Address  151 MAJORCA AVE 151 MAJORCA AVE				1		
SUITE C		SUITE C				10.004.05
CORAL GABLE	ES FL 33134	CORAL GABLES FL 331	34		DO NOT WRITE IN THIS SPACE	
					3. Date Incorporated or Qualified 01/06/1997	
2. Principal Pi	lace of Business	2a. Mailing Address			4. FEI Number	Applied For
21		26			65-07a0a1a	Not Applicable
Suite, Apt.	#, etc.,*	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be	
3	•	28		Trust Fund Contribution Added to Fees		
Zip 24	Country			try	8. This corporation owes or has paid the	current year Intangible Yes X No
[4]	9. Name and Address of Current		30		Personal Property Tax due June 30.  10. Name and Address of New Registers	
PR	ATS, GABRIEL		8	1 Name		
151 MAJORCA AVE SUITE C				2 Street Add	ress (P.O. Box Number is Not Acceptable)	
					The state of the s	
CORAL GABLES FL 33134			ļe	3		
			8	4 City		85 Zip Code
44 Durawara	to the grouisians of Castiana COZ Of Oc	and 607 1609 Florida Dest	the the et	1	poration submits this statement for the purpose	<b>L</b>
office or re	egistered agent, or both, in the State	of Florida. Such change was	authorized	by the corpora	poration submits this statement for the purpose ation's board of directors. I hereby accept the a	or changing its registered ppointment as registered
agent. I ar	m familiar with, and accept the obliga	itions of, Section 607.0505, F	lorida Statut	es.		
SIGNATURE	Signature, typed or printed name of registered ager	at and trie if applicable (NO	TF : Registered A	agent signature regu	ried when reinstating) DATE	
12.	OFFICERS AND		13.	igan o grand requ	ADDITIONS/CHANGES TO OFFICERS A	
TITLE	OP .	DELETE	1.1 TITU			Change Addition
NAME	vorobiev, vassili v	1.2 N + 1.3 S		E		
STREET ADDRESS	151 MAJORCA AVE			ET ADDRESS		
City-St-ZIP	CORAL GABLES FL 33134		1.4 CITY	- ST - ZIP		
TITLE	DS	DELETE	21 TITLI			Change Addition
NAME	VOROBIEV, GUENNADI	22 N		E		
STREET ADDRESS			2.3 STRE	ET ADDRESS		
CAY-ST-ZIP	CORAL GABLES FL 33134			-ST-ZIP		
TITLE		CODAL CADITO EL 20104		- 1		Change Addition
NAME						
STREET ADDRESS				ET ADDRESS		
CITY-ST-ZIP TITLE	OUTAL GABLES FL 33134	3.4. C		'-ST-ZIP		Change Addition
NAME						T curries T veguitor
STREET ADDRESS			4. 2 NAM 4.3 STRE	ET ADDRESS		
CITY-ST-ZIP			4.4 CITY	1		
TITLE		DELETE	5.1 TITLE			Change Addition
NAME			5.2 NAM	- 1		46
STREET ADDRESS				ET ADDRESS		مري ا
CITY-ST-ZIP	<u> </u>		5.4 CITY	- ST - ZIP	المال المالية	4.21
TITLE	٨.	☐ DELETE	6.1 TITLE		1000025010 -04/27/9801062	Change Addition
			6.2 NAM	E	-U4/2(/98U1U62	U1¢
NAME			63518	ET ADDRESS	***158,75	
			0.0 0 111	ET ADUNESS		
NAME STREET ADDRESS CITY-ST-ZIP			6.4 CITY	- ST - ZIP		
STREET ADDRESS CITY-ST-ZIP 14. I hereby c	pertify that the information supplied with on this annual report or supplied with the information supplied with the informatio	th this filing does not qualify	6.4 CITY for the exem	-ST-ZIP	n Section 119.07(3)(i), Florida Statutes. I further ure shall have the same legal effect as if made	Certify that the information