## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## **Secretary of State** DOCUMENT: # P97000015831 07-08-2004 90100 036 \*\*\*158.75 PANDO PROPERTIES, INC. Principal Place of Business Mailing Address 15165 NW 77TH AVE 15165 NW 77TH AVE 54060615 **SUITE 1002 SUITE 1002** MIAMI, FL 33014 MIAMI, FL 33014 2. Principal Place of Business 3. Mailing Address 15025 NW 77 Avenue 15025 NW 77 Avenue Suite, Apt. #, etc. Suite, Apt. #, etc. 07022004 CR2E034 (10/03) #113 -#113 City & State Applied For City & State 4. FEI Number Miami FL Miami Fl 65-0730805 Not Applicable Country Country \$8.75 Additional 5. Certificate of Status Desired 33014 USA 33014 Fee Regulred U S 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent MIAMI CORPORATE SYSTEMS, INC. Street Address (P.O. Box Number is Not Acceptable) 283 CATALONIA AVE. CORAL GABLES FL 33134 City Zìp Code 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. I am famillar with, and accept the obligations of registered agent. SIGNATURE. Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 \$5.00 May Be In accordance with s. 607.193(2)(b), F.S., the Trust Fund Contribution. Due by September 8, 2004 ---Added to Fees corporation did not receive the prior notice. 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. Addition TITLE ☐ Delete TITLE Change 15025 NW 77 Avenue Suite 113 NAMÉ PANDO: DOMINGO NAME 15165 NW 77TH AVE., #1002 STREET ADDRESS STREET ADDRESS Miami FL 33014 CITY-ST-ZIP MIAMI, FL 33014 CITY-ST-7P TITLE Delete Addition RIO DEL PEDRO HAME NAME 15025 NW 77 Avenue Suite 113 15165 NW 77TH AVE., #1002 STREET ADDRESS STREET ADDRESS Miami FL 33014 CITY-ST-ZIP. MIAMI FL 33014 CITY-ST-ZIP TITLE Change ☐ Delete TITLE ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete T(T) F ☐ Addition NAME NAME STREET ADORESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE .... TITLE ☐ Delete ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS City-ST-7P CITY-ST-ZIP 12. I hereby certify that the information supplied with this tiling 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 it made under oath; that I am an officer or director of the corporation or the receiver or trusteel empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered. 305-362-2900 SIGNATURE:

FILED

Jul 08, 2004 8:00 am