

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

FILED

Mar 12 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P97000026215 (8)

1. Corporation Name

PANTHER PRODUCTS, INC.

Principal Place of Business

7220 N.W. 36 STREET
SUITE 407
MIAMI FL 33166

Mailing Address

7220 N.W. 36 STREET
SUITE 407
MIAMI FL 33166



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

03/24/1997

4. FEI Number

65-075-9430

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐ \$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☒ Yes ☐ No

2. Principal Place of Business

21 465 E. 10th AVE

Suite, Apt. #, etc.

22 MIAMI, FLA.

23 33010 USA

9. Name and Address of Current Registered Agent

OTANO, JOSE A
7220 N.W. 36 STREET
SUITE 407
MIAMI FL 33166

2a. Mailing Address

26 250 S. COCONUT LN.

Suite, Apt. #, etc.

27 MIAMI BEACH, FL.

28 33139 USA

10. Name and Address of New Registered Agent

81 Name PEDRO R. ALBANES

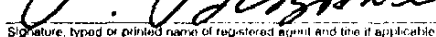
82 Street Address (P.O. Box Number is Not Acceptable)

83 250 S. COCONUT LN.

84 MIAMI BEACH FL 85 ZIP Code 33139

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE



(NOTE: Registered Agent signature required when reinstating)

3-09-98

DATE

12. OFFICERS AND DIRECTORS

TITLE D
NAME OTANO, JOSE A
STREET ADDRESS 7220 N.W. 36 STREET
CITY-ST-ZIP MIAMI FL 33166 ☒ DELETE

TITLE D
NAME MUSINO, MARTA
STREET ADDRESS 7220 N.W. 36 STREET
CITY-ST-ZIP MIAMI FL 33166 ☒ DELETE

TITLE D
NAME ALBANES PEDRO DR.
STREET ADDRESS 7220 N.W. 36 STREET
CITY-ST-ZIP MIAMI FL 33166 ☒ DELETE

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE PRES
1.2 NAME ALBANES, PEDRO R.
1.3 STREET ADDRESS 250 S. COCONUT LN.
1.4 CITY-ST-ZIP MIAMI BEACH, FL. 33139 ☒ Change ☐ Addition

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP ☐ Change ☐ Addition

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP ☐ Change ☐ Addition

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP ☐ Change ☐ Addition

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP ☐ Change ☐ Addition

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP ☐ Change ☐ Addition

14. 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 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 if changed, or on an attachment with an address.

SIGNATURE:



3-09-98 (305) 534-3807

CR2E034 (10/97)