

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P97000036370

1. Entity Name

PAN-AMERICAN-EQUIPMENT-CO., INC.

FILED

Mar 13, 2001 8:00 am
Secretary of State

03-13-2001 90115 016 ***158.75

Principal Place of Business

4412 N LOIS AVE.
TAMPA FL 33614

Mailing Address

4412 N LOIS AVE.
TAMPA FL 33614

2. Principal Place of Business

4420 N. Cortez Ave.

3. Mailing Address

4420 N. Cortez Ave.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Tampa, FL.

City & State

Tampa, FL

4. FEI Number

59-3443193

Applied For

Not Applicable

Zip

33614

Country

Hillsborough

Zip

33614

Country

Hillsborough

5. Certificate of Status Desired

X

\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

RIOS, JORGE E
4412 N LOIS AVE.
TAMPA FL 33614

7. Name and Address of New Registered Agent

Name

Edward F. Thomason

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

4420 N. Cortez Ave.

City

Tampa

FL

Zip Code

33614

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

Jorge E. Rios

Jorge E. Rios

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

(NOTE: Registered Agent signature required when reinstating)

DATE

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 \$150.00

After MAY 1, 2001 Fee will be \$550.00

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 PD
NAME RIOS, JORGE E
STREET ADDRESS 4412 N LOIS AVE.
CITY-ST-ZIP TAMPA FL 33614 ☒ Delete

TITLE VD
NAME THOMASON, EDWARD
STREET ADDRESS 4412 N LOIS AVE.
CITY-ST-ZIP TAMPA FL 33614 ☐ Delete

TITLE TD
NAME RODRIGUEZ, ALFREDO
STREET ADDRESS 3125 W CHERRY ST.
CITY-ST-ZIP TAMPA FL 33607 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

TITLE Registered AGENT
NAME Edward F. Thomason
STREET ADDRESS 4420 N. Cortez Ave.
CITY-ST-ZIP Tampa, FL. 33614 ☐ Change ☒ Addition

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

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

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

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

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:

Edward F. Thomason V.P. / Registered AGENT
Edward F. Thomason

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

(813) 875-9501

CR2E034 (10/00)