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 # P97000048540 (3)

PANWALK CORPORATION

FILED Apr 16 1998 8:00am Secretary of State



Principal Place of	of Business		Mailing Address		
638 MAPLE OAK CIRC. 638 MAPLE OAK CIRC.					
#104			∌10 4		
ALTAMONTE SPRINGS FL 32701			ALTAMONTE SPRINGS FL 32701		DO NOT WRITE IN THIS SPACE
					3. Date Incorporated or Qualified
					06/03/1997
2. Principal Place			2a. Mailing Address		4. FEI Number Applied For
	AkGHURST	<i>P</i> K		CEHUEST DR	59-3464)12 Not Applicable
Suite, Apt #,	elc.		Suite, Apt. #, etc.		5. Certificate of Status Desired \$8.75 Additional
22 220			27 220		Fee Required
City & State		17.1	City & State	,	6. Election Campaign Financing \$5.00 May Be
23 OR A	NDO	Fl	28 OP PANDO	FL	Trust Fund Contribution
Zipana	Col	untry	Zipassia	Country	8. This corporation owes or has paid the current year Intangible
24 328	25		29 328 9	30	Personal Property Tax due June 30. Yes No
	9. Name and Ad	dress of Currer	nt Registered Agent		10. Name and Address of New Registered Agent
FRANCISCO DE ASSIS O. NUNES 61 Name					
638	MAPLE OAK CIF	iC.		82 Street	Veletions (D.O. Day My series Not Apparetable)
#104				bz Sireer	Adress (P.O. Box Number is Not Acceptable)
ALTAMONTE SPRINGS FL 32701				83	<u> </u>
\	MONIE OF THE	NO TE GETOT			
				84 City	ALCOLUNIATE CODINCE EL 85 Zio Code
44 5		007.055			HITHMONIE STRINGS FL 32714
office or rec	the provisions of a historial agent, or b	iections 607.050 both, in the State	02 and 607.1508, Florida Statut e of Florida. Such change was :	es, the above-named of authorized by the corp	corporation submits this statement for the purpose of changing its registered loration'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 _					
	gnature, typed or prefied			t. Registered Agent signature	required when reinstating) DATE
12.		OFFICERS AN	ID DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	PSTD		DELETE	1.1 TITLE	Marchange ☐ Addition
NAME	FRANCISCO D			1.2 NAME	
STREET ADDRESS	638 MAPLE OF			1.3 STREET ADDRESS	1131 BENT BIRCH CT. BLIAMONTE SPRINGS FL. 32714
CITY-ST-ZIP	ALTAMONTE S	PRINGS FL 32	2701	1.4 City-St-ZiP	ALTAMONTE SPRINGS FL. 32714
TOTLE			DELETE	2.1 TITLE	☐ Change ☐ Addition
NAME				22 NAME	
STREET ADDRESS				2.3 STREET ADDRESS	
				4	
CITY-ST-ZIP TITLE			☐ DELETE	2. 4 CITY - ST - ZIP 3.1 TITLE	Change Addition
			_ otter		CT Grange CT Addition
NAME			1	3.2 NAME	
STREET ADDRESS				3.3 STREET ADDRESS	
CITY-ST-ZIP				3.4. CITY - ST - ZIP	After the Management of the Control
TITLE			☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME				4. 2 NAME	
STHEET ADDRESS				4.3 STREET ADDRESS	
CITY-ST-ZIP				4.4 CITY-ST-ZIP	
TITLE			DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME				5.2 NAME	
STREET ADDRESS				5.3 STREET ADORESS	
CITY-ST-ZIP TITLE	·		DELETE	5.4 CITY+ST-ZIP 6.1 TITLE	Change Addition
			CT Dettet		Li change Li Addetion
NAME				6.2 NAME	
STREET ADDRESS				6.3 STREET ADDRESS	
CITY - ST - ZIP				6.4 CITY-ST-ZIP	
14. I hereby cer indicated or	tity that the inform this annual repor	ation supplied w	vith this filing does not qualify for	or the exemption state	d in Section 119.07(3)(i), Florida Statutes. I further certify that the information nature shall have the same legal effect as if made under oath; that I am an

officer or director of the corporation of 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 one appears with an address.