

2008 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Jan 29, 2008 8:00 am
Secretary of State

01-29-2008 90020 016 ***158.75



DOCUMENT # P97000050291
 1. Entity Name
 PAN GROUP INC.

Principal Place of Business: 18665-97 SW 103 CT MIAMI FL 33157
 Mailing Address: 2823 MCKINLEY STREET HOLLYWOOD FL 33020



2. Principal Place of Business - No P.O. Box #
 3. Mailing Address
 State, Apt. #, etc. City & State

City & State

Zip Country Zip Country

1st MOORE CR2E034 (10/07)
 4. FE# Number: 65-0758676 Applied For: Not Applicable

6. Name and Address of Current Registered Agent
 CORPORATE CREATIONS ENTERPRISES, INC.
 4521 PGA BLVD. #211
 PALM BEACH GARDENS FL 33418

5. Certificate of Status Desired: \$8.75 Additional Fee Required
 7. Name and Address of New Registered Agent
 Name: VASILIKI PILIOURAS DARILAS
 Street Address (P.O. Box Number is Not Acceptable): 2823 McKinley ST
 City: Hollywood FL 33020
 Zip Code: 33020

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 familiar with, and accept the obligations of registered agent.
 SIGNATURE: *Vasiliki Piliouras Darilas*
Signature, typed or printed name of registered agent and state of incorporation. (None) Registered Agent to whom requirements apply (None) DATE:

FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee Will Be \$550.00
Make Check Payable to Florida Department of State

9. Election: Campaign Financing Trust Fund Contribution: \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	P	<input type="checkbox"/> Delete
NAME	DARILAS PILIOURAS, VASILIKI	
STREET ADDRESS	2823 MCKINLEY STREET	
CITY- ST- ZIP	HOLLYWOOD FL 33020	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY- ST- ZIP		
TITLE		<input type="checkbox"/> Delete
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CITY- ST- ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY- ST- ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY- ST- ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
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TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY- ST- ZIP	

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowerers.

SIGNATURE: *Vasiliki Piliouras Darilas Pres.* 1-23-08 9549965821
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Page: 1 of 1