Feb 22, 1999 8:00 am

Secretary of State

02-22-1999 90014 032 ***150.00

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Addition

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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9800000643

1. Corporation Name

CITY-ST-ZIP

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME

TITLE

NAME

PANAMERICAN FINANCIAL BROKERAGE, INC.					LABORIDAS HA FOLOL BONG BONG BONG BONG BONG BONG BONG PORTE OF THE FOLOR FOR THE FOLOR FOLOR FOLOR FOLOR FOLOR	
Principal Place	of Rusiness	Mailing Address				
•		14702 DARTMOOR LANE				
14702 DARTMO TAMPA FL 3362		TAMPA FL 33624				
THIN A I C VOCE		771117777 7 2 0002 1				DO NOT WRITE IN THIS SPACE
						3. Date Incorporated or Qualifed
						01/05/1998
2. Principal P	lace of Business	2a. Mailing Address				4. FEI Number Applied For
21						59-3486826 Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired \$8.75 Additional
22		27				5. Certificate of Status Desired Fee Required
City & State	e	City & State				6. Election Campaign Financing \$5.00 May Be
23		28				Trust Fund Contribution Added to Fees
Zip	Country Zip Co		Country		8. This corporation owes the current year Intangible	
24	25 29 30		o		Personal Property Tax.	
	9. Name and Address of Curren	t Registered Agent	_			10. Name and Address of New Registered Agent
				81	Name	
staniszewski, Henry J				82	Street Add	dress (P.O. Box Number is Not Acceptable)
14702 DARTMOOR LANE			-	Oli COLL COLL		
TAMPA FL 33624				83		
				24		85 Zip Code
				84	City	FL S Zip Code
11. Pursuant	to the provisions of Sections 607.050	2 and 607.1508, Flor	ida Statutes,	, the above	e-named corp	poration submits this statement for the purpose of changing its registered ion's board of directors. I hereby accept the appointment as registered
office or n	egistered agent, or both, in the State m familiar with, and accept the obliga	of Florida, Such char	ige was auth 0505 Florida	norized by	the corporati	tion's board of directors. I hereby accept the appointment as registered
ŭ	III lalliniai with, and accept the obliga	dona of, decilor our.	0500, 1 101101	a ciaiaios	•	to the control of the
SIGNATURE	Signature, typed or printed name of registered ager	nt and title if applicable.	(NOTE: Re	egistered Ager	nt signature requir	red when reinstating) DATE
12.		ID DIRECTORS		13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	PD		ELETE	1.1 TITLE		☐ Change ☐ Addition
NAME	STANISZEWSKI, HENRY J			1.2 NAME		
STREET ADDRESS	14702 DARTMOOR LANE			1.3 STREE	ADDRESS	
CITY-ST-ZIP	TAMPA FL 33624			1.4 CITY-S	T-ZIP	
TITLE	STD		ELETE	2.1 TITLE		Change Addition
NAME	STANISZEWSKI, STACEY A			2.2 NAME	}	
STREET ADDRESS	14702 DARTMOOR LANE				ADDRESS	
			2.4 CiTY-5			
CITY-ST-ZIP TITLE			3.4 CHY-8	01-ZIF	☐ Change ☐ Addition	
1				3.2 NAME		
NAME					. *************************************	
STREET ADDRESS				3.3 STREE		•
CITY-ST-ZIP			ELETE	3.4. CITY- 9	IT-ZIP	☐ Change ☐ Addition
TITLE		O.	ACTE I E	4.1 TITLE]	Franks Francis
NAME				4. 2 NAME		
L OTDECT ADDRESS				■ 43 STREET	TANNESS	

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 chapted, or on an attachment with an address, with all other like empowered.

4.4 CITY-ST-ZIP

5.3 STREET ADDRESS

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

5.4 CITY-ST-ZIP

5.1 TITLE 5.2 NAME

61 TITLE

6.2 NAME

DELETE

☐ DELETE

J. SIANISZEWSKI 1-10-99 913 SIGNATURE: