

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000010452

Entity Name: PANAMA SURF & SPORT, INC.

FILED
Apr 17, 2009
Secretary of State

Current Principal Place of Business:

10400 N.W. 33 STREET
STE. 110
MIAMI, FL 33172

New Principal Place of Business:

Current Mailing Address:

10400 N.W. 33 STREET
STE. 110
MIAMI, FL 33172

New Mailing Address:

FEI Number: 59-3492330 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LEVY, DROR
10400 N.W. 33 STREET
STE. 110
MIAMI, FL 33172 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: TABIB, ELIEZER
Address: 10400 N.W. 33RD ST #110
City-St-Zip: MIAMI, FL 33172

Title: VP () Delete
Name: LEVY, DROR
Address: 10400 NW 33RD ST #110
City-St-Zip: MIAMI, FL 33172

Title: T () Delete
Name: LEVY, DROR
Address: 10400 NW 33RD ST #110
City-St-Zip: MIAMI, FL 33172

Title: SEC () Delete
Name: SALGADO, MARITZA
Address: 10400 NW 33RD ST #110
City-St-Zip: MIAMI, FL 33172

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: SEC (X) Change () Addition
Name: LEVY, DROR
Address: 10400 NW 33RD ST #110
City-St-Zip: MIAMI, FL 33172

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ELIEZER TABIB

P

04/17/2009

Electronic Signature of Signing Officer or Director

_____ Date