

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **P99000056696**

1. Entity Name

**PAN AMERICAN NETWORK SERVICES, CORP.**

**FILED**  
**Aug 11, 2002 8:00 am**  
**Secretary of State**

08-11-2002 90174 038 \*\*\*150.00

Principal Place of Business

**1510 N.E. 162 STREET**  
**MIAMI FL 33162**

Mailing Address

**1510 N.E. 162 STREET**  
**MIAMI FL 33162**

2. Principal Place of Business

**505 NE 125 STREET**  
Suite, Apt. #, etc.

3. Mailing Address

**2636 SW 129 TERR**  
Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State

**MIAMI, FL**

City & State

**MIAMI, FL**

4. FEI Number

**65-1011954**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

**CHERUBIN, JEAN A**  
**1510 N.E. 162 STREET**  
**MIAMI FL 33162**

7. Name and Address of New Registered Agent

Name

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

City

**FL**

Zip Code

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

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, 2002 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 NAME STREET ADDRESS CITY-ST-ZIP	<b>P</b> <b>MARTIN, PIERRE M</b> <b>1510 N.E. 162 STREET</b> <b>MIAMI FL 33162</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>TR</b> <b>BELONY, GARY</b> <b>1510 N.E. 162 STREET</b> <b>MIAMI FL 33162</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>S</b> <b>MOISE, JEAN MAY</b> <b>1510 N.E. 162 STREET</b> <b>MIAMI FL 33162</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>VP</b> <b>CHERUBIN, JEAN A</b> <b>1510 N.E. 162 STREET</b> <b>MIAMI FL 33162</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

**SIGNATURE**

07-22-02

305-891-0000

Date

Daytime Phone #

CR2E034 (9/01)

*Attachment*

*6076813*

*P99000056696*

**HB ACCOUNTING SVCS.**

3121 WEST HALLANDALE BEACH BLVD. SUITE 115  
PEMBROKE PARK, FL 33009  
PHONE 954-965-9990 FAX 954-965-9989

August 6, 2002

DIVISION OF CORPORATIONS  
PO BOX 1500  
TALLAHASSEE, FL 32302-1500

Dear Sir or Madam:

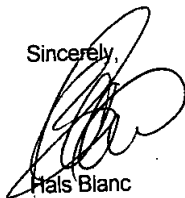
I am sending this letter to inform you that my client did not receive the UBR for the year 2001. I am sending you the fees for \$ 150.00 in order to reinstate the corporation.

The name of the corporation is Pan America Network Services, Corp.

The document Number is P99000056696

The correct address is 505 NE 125 Street Miami, Florida 33161

Sincerely,



Hals Blanc

Attachment

676813  
P99000056696

**TRANSMITTAL LETTER**

Department of State  
Division of Corporations  
P.O. Box 1500  
Tallahassee, FL 32302-1500

**SUBJECT:** Pan American Network Services, Corp.

Enclosed is an original and one (1) copy of the Uniform Business Report of Pan American Network Services, Corp. and a check for:

\$150.00

**FROM:** HALS BLANC  
Name (printed or typed)

3121 WEST HALLANDALE BEACH BLVD STE 115  
Address

PEMBROKE PARK, FL. 33009  
City, State & zip

954-965-9990  
Daytime Telephone number