


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 04, 2005 8:00 am
Secretary of State

03-04-2005 90097 009 ***150.00

DOCUMENT # P99000092959	
1. Entity Name PAN : IMAGE, INC.	

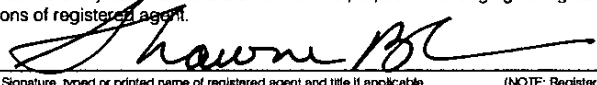
Principal Place of Business 17236 HAMPTON BLVD BOCA RATON, FL 33496-3013	Mailing Address 17236 HAMPTON BLVD BOCA RATON, FL 33496-3013
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00066142

2. Principal Place of Business 744 Gypsy Lane Suite, Apt. #, etc.	3. Mailing Address 3200 N. Military Tr. Suite, Apt. #, etc. #201
City & State Pittsburgh, PA	City & State Boca Raton
Zip 15228	Country USA
Zip FL 33431	Country USA

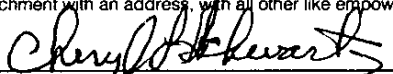
02212005 Chg-P CR2E034 (10/03)	
4. FEI Number 11-2508081	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent SCHWARTZ, ROBERT C VP 17236 HAMPTON BLVD BOCA RATON, FL 33496	7. Name and Address of New Registered Agent Name: Blair, Shawne Street Address (P.O. Box Number is Not Acceptable) 3200 N. Military Trail #201 City: Boca Raton FL Zip Code: 33431
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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: 	Shawne Blair 2/21/05
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE	

FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P SCHWARTZ, CHERYL L 17236 HAMPTON BLVD BOCA RATON, FL 334963013 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	P Schwartz, Cheryl 744 Gypsy Lane Boca Pittsburgh, PA 15228 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP SCHWARTZ, ROBERT C 17236 HAMPTON BLVD BOCA RATON, FL 334963013 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP Schwartz, Robert 744 Gypsy Lane Pittsburgh, PA 15228 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	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"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.	
SIGNATURE:  Pres.	2/21/05 412 877-8526
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #	