2000 UNIFORM BUSINESS REPORT (UBR) **FILED** May 04, 2000 8:00 am Secretary of State DOCUMENT # **P99000099576** PAN AMERICAN AT CORAL SPRINGS, INC. 05-04-2000 90115 002 ***150.00 Principal Place of Business Mailing Address C/O MR. CARLOS LOPEZ-CANTERA C/O MR. CARLOS LOPEZ-CANTERA 7415 N.W. 7TH STREET 7415 N.W. 7TH STREET 840396 MIAMI FL 33126 MIAMI FL 33126-2906 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE 4. FEI Number 096 0295 Applied For City & State City & State Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name DADE CORPORATE SERVICES, INC. Street Address (P.O. Box Number is Not Acceptable) 2300 CORAL WAY SUITE 103 MIAMI FL 33145 Zip Code City FL 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 DATE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5,00 May Be After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) \Box Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 11. Addition TITLE ☐ Delete P/D TITLE LOPEZ-CANTERA, CARLOS NAME NAME Lopez-Cantera, Carlos STREET ADDRESS 7415 N.W. 7TH STREET STREET ADDRESS 7415 NW 7th Street CITY-ST-ZIP CITY-ST-ZIP Miami, FL 33126 **MIAMI FL 33126** ·] Change M Addition TITLE ☐ Delete VP/S/D TITLE Blumenthal, Stephen 7415 NW 7th Street NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIF Miami, FL 33126 ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition ☐ Delete TITLE TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Addition TITLE ☐ Change

bes not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information of urate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director to the report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if supplied with this filing 13. I hereby certify that the information indicated on this report or s ป report is true and of the corporation or the r changed, or on an attach

NAME

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE:

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

☐ Delete

antra