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

**PROFIT CORPORATION** ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

Principal Place of Business

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

13681 SW 55 TERR

MIAMI FL 33175

21

22

S27241

(6)

J. M. PANDO, INC.

Mailing Address

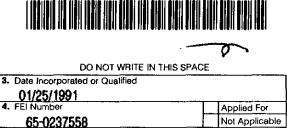
13681 SW 55 TERR

**MIAMI FL 33175** 

2a, Mailing Address

Suite, Apt. #, etc.

**FILED** Apr 01 1998 8:00am Secretary of State



5. Certificate of Status Desired

Not Applicable

\$8.75 Additional

Fee Required

City & Stat	е		City & State		•		Election Campaign Financing \$5.00 May Be		
23	<del>-1</del> -	28				Trust Fund Contribution Added to Fees			
⊸ <sup>Zip</sup>	Count	· .	Z₁p		Country		8. This corporation owes or has paid the current year Intangible		
24	25		29	30	<del></del>		Personal Property Tax due June 30. Yes No N		
9. Name and Address of Current Registered Agent					-	10. Name and Address of New Registered Agent			
PANDO, JOSE M. 13681 SW 55 TERR MIAMI FL 33175					"	81 Name			
					82 Street Address (P.O. Box Number is Not Acceptable)				
					83				
					84 City 85 Zip Code				
						FL   65   210 Code			
11. Pursuant	to the provisions of Sec	ctions 607.0502 a	nd 607.1508, Flori	da Statutes, th	e above	named corp	poration submits this statement for the purpose of changing its registered		
office of r	'egistered agent, or bol im familiar with, and ac	th, in the State of I cept the obligation	Florida. Such char ns of Section 607	nge was autho .0505, Florida	rized by Statutes	the corporat	tion's board of directors. I hereby accept the appointment as registered		
SIGNATURE		<b>5</b>	,						
SIGNATURE	Signature, typed or printed nar	ne of registered agent an	d tille if applicable	(NOTE Regi	stered Age	nt signature requir	red when reinstaling) DATE		
12.		OFFICERS AND D			13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	D		☐ D	ELETE	1.1 TITLE		Change Addition		
NAME	PANDO, JOSE M	١.		į ·	1.2 NAME				
STREET ADDRESS	13681 SW 55 TE	RR			1.3 STREET	ADDRESS			
CRTY-ST-ZIP	MIAMI FL			] .	1.4 CITY - ST	r-ZIP			
TITLE			□ Di	ELETE :	2.1 TITLE		Change Addition		
NAME					2.2 NAME				
STREET ADDRESS					2.3 STREET	ADDRESS			
CITY-ST-ZIP				•	2. 4 CITY - S	T-ZIP			
TITLE			DI		3 1 TITLE		☐ Change ☐ Addition		
NAME					3.2 NAME				
STREET ADDRESS					3.3 STREET	ADDRESS			
CITY-ST-ZIP					3.4. CITY-S	T-ZIP			
TITLE			DI		4.1 TITLE		Change Addition		
NAME				<b>.</b>	4. 2 NAME				
STREET ADDRESS				Į.	4.3 STREET	ADDRESS			
CITY-ST-ZIP				<u> </u>	4.4 CITY-S1	- ZIP			
TITLE		- M L1	DI	ELETE !	5.1 TITLE	7	☐ Change ☐ Addition		
NAME					5.2 NAME				
STREET ADDRESS				1.	S 9 STAFFT I	ADDRESS			

14. Thereby 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 an unal 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 changed, by on an attachment with an address.

5.4 CITY-ST-ZIP

6.3 STREET ADDRESS 6.4 CITY-ST-ZIP

6.2 NAME

DELETE

**SIGNATURE:** 

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

NAME

3/28/48

305-559-5921

Change

Addition