2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED **DOCUMENT # \$49703** 07 DEC -4 PM 3:37 PANÁMA MOTORS, INC. SECRETARY OF STATE TALLAHASSEE, FLORIDA Principal Place of Business Mailing Address 7406 N MAIN ST 7406 N MAIN ST JACKSONVILLE, FL 32208 JACKSONVILLE, FL 32208 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 12012007 Chg-P CR2E034 (12/06) City & State City & State 4. FEI Number Applied For 59-3061811 Not Applicable Zip Country Zio Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent BERRYMAN, RICHARD L Street Address (P.O. Box Number is Not Acceptable) **7406 N MAIN ST** JACKSONVILLE, FL 32208 City 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. I am familiar with, and accept the obligations of registered agent. Signature, typed or printed name of registered agent and title if applicable, (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be Amended AR is \$61.25 Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. PD TITLE ☐ Delete TITLE D Change ☐ Addition BERRYMAN, VIVIAN D NAME BERRYMAN, VIVIAN D. 541 VERA DRIVE NAME STREET ADDRESS 541 VERA DR STREET ADDRESS JACKSUNVI'lle, FL32218 CITY-ST-ZIP JACKSONVILLE, FL 32218 CITY-ST-7IP VD TITLE ☐ Delete TITLE Change ☐ Addition BERRYMAN, Keith L. 3643 MARS L PARK GOVET BERRYMAN, KEITH L NAME NAME STREET ADDRESS 3643 MARSH PARK COURT STREET ADDRESS JACKSONVILLE, FL 32250 CITY-ST-ZIP CITY-ST-ZIP JACKSONVIlle, FL 32250 VSTD HILE ☐ Delete TITLE Addition 400113558294 01/02/08--01043+013 **70.00 BERRYMAN, RICHARD L NAME NAME STREET ADDRESS 10821 PEACEFUL HARBOR DRIVE STREET ADDRESS CITY-ST-ZIP JACKSONVILLE, FL 32218 CITY-ST-ZIP ☐ Delete THLE VD TITLE Change Addition KEY, CHERYL D NAME STREET ADDRESS 15015 CAPE DRIVE EAST STREET ADDRESS JACKSONVILLE, FL 32226 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete ☐ Change Addition BERRYMAN, JOSEPH D. 541 VERA DRIVE NAME NAME STREET ADDRESS STREET ADDRESS F632218 CITY-ST-ZIP CITY-ST-ZIP JACKSONVILLE, ☐ Delete ☐ Change ☐ Addition TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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.

(904)765-1381