

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L13000046037

Entity Name: PAMANOS LLC**Current Principal Place of Business:**15316 VIREOGLLEN LANE
LITHIA, FL 33547**Current Mailing Address:**15316 VIREOGLLEN LANE
LITHIA, FL 33547 US**FEI Number:** 46-2401729**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**BUSINESS FILINGS INCORPORATED
515 E. PARK AVENUE
TALLAHASSEE, FL 32301 US*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:** MARK WILLIAMS

05/29/2015

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MEMBER
Name FLOREZ, MIGUEL
Address 15316 VIREOGLLEN LANE
City-State-Zip: LITHIA FL 33547

Title MEMBER
Name FLOREZ, LUIS GABRIEL
Address 22 ROME ST APT. 2
City-State-Zip: NEWARK NJ 07105

Title MEMBER
Name FLOREZ, JAVIER
Address 105 MCWHORTER ST APT. 2
City-State-Zip: NEWARK NJ 07105

Title PRESIDENT
Name FLOREZ, MIGUEL
Address 15316 VIREOGLLEN LANE
City-State-Zip: LITHIA FL 33547

Title VICE-PRESIDENT
Name FLOREZ, JAVIER
Address 105 MCWHORTER ST APT. 2
City-State-Zip: NEWARK NJ 07105

Title SECRETARY
Name FLOREZ, LUIS GABRIEL
Address 22 ROME ST APT. 2
City-State-Zip: NEWARK NJ 07105

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: JAVIER FLOREZ

MEMBER

05/29/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date