

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT 1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Matham
Secretary of State
DIVISION OF CORPORATIONS

FILED
Apr 06 1996 8:00 am
Secretary of State

DOCUMENT # H03738 (2)
1. Corporation Name
BATAN MIAMI CORP.



Principal Place of Business: **C/O PACIFIC R E MGMT CORP/ 2490 CORAL WAY #403 MIAMI FL 33145 US**
Mailing Address: **C/O PACIFIC RE MGMT CORP/2490 CORAL WAY #403 MIAMI FL 33145 US**

3. Date Incorporated or Qualified: **05/14/1984**
3a. Date of Last Report: **04/24/1995**
4. EIN Number: **13-3227527**
Applied For: Not Applicable
5. Certificate of Status Desired: **\$8.75 Additional Fee Required**
6. Election Campaign Financing Trust Fund Contribution: **\$5.00 May Be Added to Fees**
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes: Yes No

2. Principal Place of Business: [21] State, Apt. #, etc. [22] City & State [23] Zip [24] Country [25]
2a. Mailing Address: [26] State, Apt. #, etc. [27] City & State [28] Zip [29] Country [30]

9. Name and Address of Current Registered Agent: **MURAI,WALD,BIONDO,MATTHEWS & MORENO, PA 25 S.E. SECOND AVENUE, SUITE #900 MIAMI FL 33131**
10. Name and Address of New Registered Agent: [81] Name [82] Street Address (P.O. Box Number is Not Acceptable) [83] [84] City [85] Zip Code **FL**

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. They hereby accept the appointment as registered agent. I am familiar with and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: _____ DATE: _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P	1. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SCHULTHEIS, THEODORE	2. NAME	
STREET ADDRESS	422 EAST 58 STREET	3. STREET ADDRESS	
CITY - ST - ZIP	NEW YORK NY	4. CITY - ST - ZIP	
TITLE	DVP	5. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ISAIAS, ROBERTO	6. NAME	
STREET ADDRESS	422 EAST 58TH STREET	7. STREET ADDRESS	
CITY - ST - ZIP	NEW YORK NY	8. CITY - ST - ZIP	
TITLE	DT	9. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ISAIAS, WILLIAM	10. NAME	
STREET ADDRESS	422 EAST 58 STREET	11. STREET ADDRESS	
CITY - ST - ZIP	NEW YORK NY	12. CITY - ST - ZIP	
TITLE	DS	13. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ISAIAS, EMILIO	14. NAME	
STREET ADDRESS	422 EAST 58TH ST.	15. STREET ADDRESS	
CITY - ST - ZIP	NEW YORK NY	16. CITY - ST - ZIP	
TITLE		17. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		18. NAME	
STREET ADDRESS		19. STREET ADDRESS	
CITY - ST - ZIP		20. CITY - ST - ZIP	
TITLE		21. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		22. NAME	
STREET ADDRESS		23. STREET ADDRESS	
CITY - ST - ZIP		24. CITY - ST - ZIP	

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14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 199.07(5)(B), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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, or on an attachment to an address.

SIGNATURE: **THEODORE SCHULTHEIS** [Signature] **2/2/96** **305-859-9811**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (12/95)