FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT

1996

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

DOCUMENT # **141203** **(0)**

1. Corporation Name

PAN AMERICAN MORTGAGE CORP.

Principal Place of Business	Mailing Address
200 S.E. FIRST ST. MIAMI FL 33131	200 S.E. FIRST ST. MIAMI FL 33131

3. Date Incorporated or Qualified: **12/10/1941**

3a. Date of Last Report: **06/22/1995**

4. FEI Number: **59-0374604** ☐ 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	2a. Mailing Address
21 100 S TRYON ST	26 100 S TRYON ST
Suite, Apt. #, etc. 22 NC1-002-20-18	Suite, Apt. #, etc. 27 NC1-002-20-18
City & State 23 CHARLOTTE NC	City & State 28 CHARLOTTE NC
Zip 24 28255 — Country 25	Zip 29 28255 — Country 30

9. Name and Address of Current Registered Agent

FURMAN, JACK
200 S.E. 1ST STREET
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 — **FL** — 85 Zip Code

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. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: Signature, typed or printed name of registered agent, and title if applicable — DATE: Registered Agent's signature required if item 9 is changed — DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	S	☐ DELETE	1.1 TITLE		☐ Change ☐ Addition
NAME	FURMAN, JACK A.		1.2 NAME		
STREET ADDRESS	200 S.E. 1ST ST.		1.3 STREET ADDRESS		
CITY-ST-ZIP	MIAMI FL		1.4 CITY-ST-ZIP		
TITLE	PD	☐ DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME	DAVIS, WINTHROP F.		2.2 NAME		
STREET ADDRESS	200 S.E. 1ST ST.		2.3 STREET ADDRESS		
CITY-ST-ZIP	MIAMI FL		2.4 CITY-ST-ZIP		
TITLE	CD	☐ DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME	ALLEN, JR., WILLIAM H.		3.2 NAME		
STREET ADDRESS	200 S.E. 1ST ST.		3.3 STREET ADDRESS		
CITY-ST-ZIP	MIAMI FL		3.4 CITY-ST-ZIP		
TITLE	D	☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME	MORRISON, WILLIAM L.		4.2 NAME		
STREET ADDRESS	200 S.E. 1ST ST.		4.3 STREET ADDRESS		
CITY-S ZIP	MIAMI FL		4.4 CITY-ST-ZIP		
TITLE	TV	☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME	BEIER, THOMAS E.		5.2 NAME		
STREET ADDRESS	200 S.E. 1ST ST.		5.3 STREET ADDRESS		
CITY-ST-ZIP	MIAMI FL		5.4 CITY-ST-ZIP		
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP		

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5-20 96 JR

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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 119.07(3)(k), 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 with an address.

SIGNATURE: Gary A. Williams — 5/14/96 — (704) 386-5856

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #