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PROFIT
-CORPORATION
ANNUAL REPORT
1996 1997

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

FILED
Jun 05 1997 8:00am
Secretary of State

DOCUMENT # F94000004968 (3)

1. Corporation Name
ULTRAMAR TRAVEL BUREAU, INC.

Principal Place of Business	Mailing Address
8 W. 51ST ST. NEW YORK NY 10019-6909	8 W. 51ST ST. NEW YORK NY 10019-6909

3. Date Incorporated or Qualified: 09/26/1994	3a. Date of Last Report: 05/01/1996
4. FEI Number: 13-1565927	Applied For / Not Applicable
5. Certificate of Status Desired ☐	$9.75 Additional Fee Required
6. Florida Campaign Financing Trust Fund Contribution ☐	$5.00 May Be Added to Fees
7. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No	

21 Principal Place of Business	28 Mailing Address
14 E 47TH STREET	SAME
22 Suite, Apt. #, etc.	27 Suite, Apt. #, etc.
23 City & State: NEW YORK	29 City & State
24 Zip: 10017-1905 25 Country: USA	26 Zip 30 Country

8. Name and Address of Current Registered Agent

KLARIC, ANA
1111 LINCOLN ROAD MALL
6TH FLOOR
MIAMI BEACH FL 33139

10. Name and Address of New Registered Agent

31 Name: Jorge Caamano
32 Street Address (P.O. Box Number is Not Acceptable): 1111 Lincoln Road Mall
33 6th Fl
34 City: Miami Beach FL 35 Zip Code: 33139

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 X [redacted] (NOTE: Registered Agent signature required when reinstating) DATE 5/1/97

12. OFFICERS AND DIRECTORS

TITLE	PD	☐ DELETE
NAME	KLEBANOW, PETER	
STREET ADDRESS	8 W. 51ST ST.	
CITY-ST-ZIP	NEW YORK NY 10019-6909	
TITLE	D	☐ DELETE
NAME	KLEBANOW, BERTRAM	
STREET ADDRESS	8 W. 51ST ST.	
CITY-ST-ZIP	NEW YORK NY 10019-6909	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS, CHANGES TO OFFICERS AND/OR DIRECTORS

1.1 TITLE		☒ Change ☐ Addition
1.2 NAME		
1.3 STREET ADDRESS	14 E 47TH STREET	
1.4 CITY-ST-ZIP	NEW YORK, NY 10017-1905	
2.1 TITLE		☒ Change ☐ Addition
2.2 NAME		
2.3 STREET ADDRESS	14 E 47TH STREET	
2.4 CITY-ST-ZIP	NEW YORK, N.Y. 10017-1905	
3.1 TITLE		☐ Change ☐ Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		☐ Change ☐ Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		☐ Change ☐ Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		☐ Change ☐ Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 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 119.07(3)(i), 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: X PETER KLEBANOW PRESIDENT 212 856-5600
SIGNATURE AND TYPED OR PRINTED NAME OF INDIVIDUAL SIGNING BY ORDER OF BOARD — Title — Daytime Phone #

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