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 # **F94000005279 (4)**

1. Corporation Name

CONSOLIDATED WESTWAY GROUP, INC.

Principal Place of Business	Mailing Address
701 BRICKELL AVE. SUITE 2200 MIAMI FL 33131 US	701 BRICKELL AVE. SUITE 2200 MIAMI FL 33131 US

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

3. Date Incorporated or Qualified	3a. Date of Last Report
10/11/1994	06/20/1995

4. FEI Number: **22-1974360** ☐ 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

9. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

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 of New Registered Agent) DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
1 TYP	D	☐ DELETE	1.1 TITLE		☐ Change ☐ Addition
1 NAM	RIVERO, JOSE A		1.2 NAME		
1 STR	701 BRICKELL AVE. SUITE 2200		1.3 STREET ADDRESS		
1 CTY-ST-ZIP	MIAMI FL		1.4 CITY-ST-ZIP		
2 TYP	D	☐ DELETE	2.1 TITLE		☐ Change ☐ Addition
2 NAM	DUBARRY, DANIELLE		2.2 NAME		
2 STR	20/22 RUE DE LA VILLA, L EVEQUE		2.3 STREET ADDRESS		
2 CTY-ST-ZIP	PARIS FR		2.4 CITY-ST-ZIP		
3 TYP	D	☐ DELETE	3.1 TITLE		☐ Change ☐ Addition
3 NAM	BENHAMOU, MAX		3.2 NAME		
3 STR	20/22 RUE DE LA VILLA, L EVEQUE		3.3 STREET ADDRESS		
3 CTY-ST-ZIP	PARIS FR		3.4 CITY-ST-ZIP		
4 TYP	DVS	☐ DELETE	4.1 TITLE		☒ Change ☐ Addition
4 NAM	HEDREI, STEPHEN A		4.2 NAME		
4 STR	TWO WORLD FINANCIAL CENTER, TOWER B, 30FL		4.3 STREET ADDRESS	701 BRICKELL AVE. SUITE 2200	
4 CTY-ST-ZIP	NEW YORK NY 10281		4.4 CITY-ST-ZIP	MIAMI FL. 33131	
5 TYP	T	☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
5 NAM	JACOBS, JOHN M R.		5.2 NAME		
5 STR	701 BRICKELL DR., STE. 2200		5.3 STREET ADDRESS		
5 CTY-ST-ZIP	MIAMI FL 33131		5.4 CITY-ST-ZIP		
6 TYP		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
6 NAM			6.2 NAME		
6 STR			6.3 STREET ADDRESS		
6 CTY-ST-ZIP			6.4 CITY-ST-ZIP		

CR2E034 (12/95)

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 added by an attachment with an address.

SIGNATURE: Stephen A. Hedrei. 4/25/96 (305) 347-4702

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