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

FILED
Feb 27 1996 8:00 am
Secretary of State

DOCUMENT # **M17649** **(8)**

1. Corporation Name

AMERICAN EXPRESS TRS INC.

Principal Place of Business

200 VESEY STREET
NEW YORK NY 10285-4415
US

Mailing Address

200 VESEY STREET
NEW YORK NY 10285-4415
US

3. Date Incorporated or Qualified: **07/02/1985**

3a. Date of Last Report: **02/21/1995**

2. Principal Place of Business
21
Street, Apt. #, etc.
22
City & State
23
Zip 24 Country 25

2a. Mailing Address
26
Street, Apt. #, etc.
27
City & State
28
Zip 29 Country 30

4. FEI Number: **13-3385529** ☐ 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

IMMER, JOHN G.
169 FLAGLER ST.
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 607.0505 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 _____ DATE _____

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	P	☐ DELETE	1 TITLE		☐ Change ☐ Addition
NAME	FERNANDEZ, MIGUEL A		2 NAME		
STREET ADDRESS	550 BILTMORE WAY		3 STREET ADDRESS		
CITY-ST-ZIP	CORAL GABLES FL		4 CITY-ST-ZIP		
TITLE	VP	☐ DELETE	1 TITLE		☐ Change ☐ Addition
NAME	WEDEN, RICHARD		2 NAME		
STREET ADDRESS	DELEGACION BENITO JUAREZ		3 STREET ADDRESS		
CITY-ST-ZIP	MEXICO CITY, MEXICO		4 CITY-ST-ZIP		
TITLE	VP	☐ DELETE	1 TITLE		☐ Change ☐ Addition
NAME	ZERO, REGINALDO		2 NAME		
STREET ADDRESS	550 BILTMORE WAY		3 STREET ADDRESS		
CITY-ST-ZIP	CORAL GABLES FL		4 CITY-ST-ZIP		
TITLE	T	☐ DELETE	4 TITLE		☒ Change ☐ Addition
NAME	STEVELMAN, JAY B		4 NAME		
STREET ADDRESS	AMERICAN EXP TOWER ~~#WFC~~		4 STREET ADDRESS	200 Vesey Street	
CITY-ST-ZIP	NEW YORK NY		4 CITY-ST-ZIP		
TITLE	T	☐ DELETE	5 TITLE		☒ Change ☐ Addition
NAME	BERMAN, WALTER		5 NAME		
STREET ADDRESS	AMERICAN EXP TOWER ~~#WFC~~		5 STREET ADDRESS	200 Vesey Street	
CITY-ST-ZIP	NEW YORK NY		5 CITY-ST-ZIP		
TITLE	S	☐ DELETE	6 TITLE		☒ Change ☐ Addition
NAME	LEDGER, DONALD J		6 NAME		
STREET ADDRESS	AMERICAN EXP TOWER ~~#WFC~~		6 STREET ADDRESS	200 Vesey Street	
CITY-ST-ZIP	NEW YORK NY		6 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 on an attachment with an address.

SIGNATURE: _____ Jay B. Stevelman 2/14/96
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Treasurer
Date Daytime Phone #