SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997.
AMOUNT DUE ON OR BEFORE 9/17/97: $550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: $750.)

FILED
Sep 23 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT
1997

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

DOCUMENT # **P03038** **(7)**

1. Corporation Name
TRANSPORTES AEREOS MERCANTILES PANAMERICANOS, S. A.

Principal Place of Business	Mailing Address
6440 NW 18TH ST MIAMI FL 33152	PO BOX 524235 MIAMI FL 33152

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 08/14/1984
3a. Date of Last Report: 03/12/1996
4. FEI Number: 59-1908878 ☐ 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 owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☐ No

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

9. Name and Address of Current Registered Agent

JARVIS, JAMES W.
JARVIS, ROFFINO & VILLASANTE
550 BILTMORE WAY, SUITE 830
MIAMI FL 33134

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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD COULSON, JORGE CRA. 76 NO. 34A-61 MEDELLIN, COLOMBIA	XX DELETE	1.1 TITLE / 1.2 NAME / 1.3 STREET ADDRESS / 1.4 CITY-ST-ZIP	PD CAMPILLO, ANTONIO CRA. 76 NO.34A-61 MEDELLIN,COLOMBIA	X Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D MONSALVE, LUIS D. CRA. 76 NO. 34A-61 MEDELLIN, COLUMBIA	XX DELETE	2.1 TITLE / 2.2 NAME / 2.3 STREET ADDRESS / 2.4 CITY-ST-ZIP	D JACOBSEN, FRED CRA. 76 NO. 34A-61 MEDELLIN,COLOMBIA	X Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D MEJIA, ALVARO L CRA. 76 NO. 34A-61 MEDELLIN, COLOMBIA	☐ DELETE	3.1 TITLE / 3.2 NAME / 3.3 STREET ADDRESS / 3.4 CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D JARAMILLO O., ALVARO L CRA. 76 NO. 34A-61 MEDELLIN, COLOMBIA	XX DELETE	4.1 TITLE / 4.2 NAME / 4.3 STREET ADDRESS / 4.4 CITY-ST-ZIP	D CALIS, LUBERTUS CRA. 76 NO. 34A-61 MEDELLIN,COLOMBIA	X Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D DE GREIFF, JUAN C . CRA. 76 NO. 34A-61 MEDELLIN, COLOMBIA	☐ DELETE	5.1 TITLE / 5.2 NAME / 5.3 STREET ADDRESS / 5.4 CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	6.1 TITLE / 6.2 NAME / 6.3 STREET ADDRESS / 6.4 CITY-ST-ZIP		☐ Change ☐ Addition

CR2E034 (4/97)

14. I do hereby certify that the information supplied with this filing 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: [signature] Antonio Campillo 09/09/97