

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 01, 2001 8:00 am
Secretary of State
03-01-2001 90059 020 ***150.00

DOCUMENT # P03038

1. Entity Name
TRANSPORTES AEREOS MERCANTILES PANAMERICANOS, S.

Principal Place of Business

1650 N.W. 66 AVENUE
BUILDING 708
MIAMI FL 33152
US

Mailing Address

P.O. BOX 524235
MIAMI FL 33152-4235
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **59-1908878**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

JARVIS, JAMES W ESQ
JARVIS & ASSOCIATES, P.A.
THE ATRIUM, 1500 SAN REMO, SUITE 145
CORAL GABLES FL 33146

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD
NAME JACOBSEN, FRED
STREET ADDRESS CRA. 76 NO. 34A-61
CITY-ST-ZIP MEDELLIN, COLUMBIA ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE CS
NAME PALACIO, ADRIANA
STREET ADDRESS CRA. 76 NO. 34A-61
CITY-ST-ZIP MEDELLIN, COLOMBIA ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE D
NAME BUITRAGO, PEDRO F
STREET ADDRESS CRA. 76 NO. 34A-61
CITY-ST-ZIP MEDELLIN, COLOMBIA ☒ Delete

TITLE M
NAME PULIDO PEDRO
STREET ADDRESS 1650 NW 66th Avenue, Bldg 708, Suite 206
CITY-ST-ZIP Miami, Florida 33152 ☐ Change ☒ Addition

TITLE D
NAME LEONARDUS ZWINKELS
STREET ADDRESS CRA 76 NO 34A-61
CITY-ST-ZIP MEDELLIN CO ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

13. I 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with my address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/00)