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PROFIT CORPORATION ANNUAL REPORT

1996

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

DOCUMENT # P92000007742

1. Corporation Name

3000 Coral Way, Inc.

Principal Place of Business / Mailing Address

c/o Morgan, Lewis & Bockius LLP
5300 First Union Financial Center
200 S. Biscayne Blvd.
Miami, Florida 33131

2. Principal Place of Business	2a. Mailing Address	3. Date Incorporated or Qualified	3a. Date of Last Report
21 c/o Morgan, Lewis & Bockius LLP	26	December 1, 1992	
Suite, Apt. #, etc 22 200 S. Biscayne Blvd., #5300	Suite, Apt. #, etc 27	4. FEI Number 65-0371374	☐ Applied For ☐ Not Applicable
City & State 23 Miami, Florida	City & State 28	5. Certificate of Status Desired ☐	**$8.75** Additional Fee Required
Zip / Country 24 33131 / 25 USA	Zip / Country 29 / 30	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

Manuel De La Fuente, Jr.
927 Crandon Blvd., Suite 14
Key Biscayne, FL 33149

10. Name and Address of New Registered Agent

81 Name: CT Corporation Systems
82 Street Address (P.O. Box Number is Not Acceptable): 1200 S. Pine Island Road
83
84 City: Plantation **FL** 85 Zip Code: 33324

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: Tanya M. Villar — TANYA M. VILLAR SPECIAL ASSISTANT SECRETARY — DATE: 4-8-96
(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	P/D Carlos Garcia Pardo 200 S. Biscayne Blvd., #5300 Miami, FL 33131 ☐ DELETE	1.1 TITLE / 1.2 NAME / 1.3 STREET ADDRESS / 1.4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S/D Guillermo Canals 200 S. Biscayne Blvd., #5300 Miami, FL 33131 ☐ DELETE	2.1 TITLE / 2.2 NAME / 2.3 STREET ADDRESS / 2.4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Jose Luis Tafur 200 S. Biscayne Blvd., #5300 Miami, FL 33131 ☐ 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	☐ DELETE	4.1 TITLE / 4.2 NAME / 4.3 STREET ADDRESS / 4.4 CITY-ST-ZIP	800001788348 -04/22/96--01027--023 ***200.00 ☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ 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 (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)(k), 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: _____ Carlos Garcia Pardo — Date — Daytime Phone #
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR