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PROFIT CORPORATION ANNUAL REPORT

1996

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

DOCUMENT # **P95000096706 (3)**

1. Corporation Name

TRAVELER'S EMERGENCY NETWORK, INC.

Principal Place of Business	Mailing Address
2600 DOUGLAS ROAD SUITE 410 DOUGLAS CENTRE CORAL GABLES FL 33134	2600 DOUGLAS ROAD SUITE 410 DOUGLAS CENTRE CORAL GABLES FL 33134

3. Date Incorporated or Qualified: 12/21/1995
3a. Date of Last Report:

2. Principal Place of Business	2a. Mailing Address
21 2620 S.W. 27th Avenue	26 2620 S.W. 27th Avenue
Suite, Apt. #, etc. 22 Fourth Floor	Suite, Apt. #, etc. 27 Fourth Floor
City & State 23 Miami, FL 33133	City & State 28 Miami, FL 33133
Zip / Country 24 / 25 USA	Zip / Country 29 / 30 USA

4. FEI Number: applied for ☐ 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

DUNCAN, ROSARIO P
2600 DOUGLAS ROAD
SUITE 410 DOUGLAS CENTRE
CORAL GABLES FL 33134

10. Name and Address of New Registered Agent

81 Name: ELOY DE ARMAS
82 Street Address (P.O. Box Number is Not Acceptable): 2620 S.W. 27th Avenue
83
84 City: Miami **FL** 85 Zip Code: 33133

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: Eloy de Armas — Signature, typed or printed name of registered agent (and title, if applicable) — Date: 4-24-96

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D DUNCAN, ROSARIO P 2600 DOUGLAS ROAD SUTIE 410 DOUNGLAS CENTR CORAL GABLES FL 33134 ☒ DELETE	11 TITLE / 12 NAME / 13 STREET ADDRESS / 14 CITY-ST-ZIP	D,C SIERRA, ANTONIO M. 2600 Douglas Rd., #410 Coral Gables, FL 33134 ☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ DELETE	21 TITLE / 22 NAME / 23 STREET ADDRESS / 24 CITY-ST-ZIP	D DE ARMAS, ELOY 2620 S.W. 27th Avenue Miami, FL 33133 ☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ DELETE	31 TITLE / 32 NAME / 33 STREET ADDRESS / 34 CITY-ST-ZIP	D,P ALEJANDRO MAZAL 200 S.E 1st St., Suite 503 Miami, FL 33131 N/A ☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ DELETE	41 TITLE / 42 NAME / 43 STREET ADDRESS / 44 CITY-ST-ZIP	D,VP POQUET, JOSEPH 200 S.E. 1st.ST., Suite 503 Miami, FL 33131 N/A ☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ DELETE	51 TITLE / 52 NAME / 53 STREET ADDRESS / 54 CITY-ST-ZIP	D, S,T CHAMBLISS, CHRISTOPHER 2620 S.w. 27th Avenue Miami, FL 33133 ☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ DELETE	61 TITLE / 62 NAME / 63 STREET ADDRESS / 64 CITY-ST-ZIP	500001808995 -05/06/96--01036--030 ***200.00 ☐ Change ☐ Addition AEB 5-1-96

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: Eloy de Armas — SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — ELOY DE ARMAS — Date: 3-26-96 — (305) 443-2898 Daytime Phone #