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Apr 14 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 # P96000019055 (8)

1. Corporation Name
EAL ASSET COMPANY NO. 2, INC.



Principal Place of Business
2333 PONCE DE LEON BLVD.
PH 1111
CORAL GABLES FL 33134

Mailing Address
2333 PONCE DE LEON BLVD.
PH 1111
CORAL GABLES FL 33134-5422

3. Date Incorporated or Qualified
02/28/1996

3a. Date of Last Report

2. Principal Place of Business
21 9300 NW 36 St.
Suite, Apt. #, etc.
22 c/o PAN AM
City & State
23 MIAMI FLORIDA
Zip
24 33178

2a. Mailing Address
25 9300 NW 36 St.
Suite, Apt. #, etc.
27 c/o PAN AM, Tax Dept.
City & State
28 MIAMI, FL
Zip
29 33178

30 Country

4. FEI Number
65-0729530

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

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE FL 32301-2525

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

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	DELETE
	WESTON, ANDREW	% 2333 PONCE DE LEON BLVD., PH 1111	CORAL GABLES FL 33134	<input checked="" type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	DELETE	Change	Addition
1.1				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
1.2				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
1.3				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
1.4				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2.1	GENERAL COUNSEL & CFO			<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
2.2	John J. Ogilby, Jr.			<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
2.3	9300 NW 36 Street			<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
2.4	MIAMI, FL. 33178			<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
3.1	PCEOD			<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
3.2	MARTIN R. Shugrue, Jr.			<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
3.3	9300 NW 36 Street			<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
3.4	MIAMI, FL. 33178			<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
4.1				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4.2				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4.3				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4.4				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5.1				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5.2				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5.3				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5.4				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6.1				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6.2				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6.3				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6.4				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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 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: John J. Ogilby, Jr. 3/27/97 305/873-3877

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

0181029

CR2E034 (9/96)