

**2018 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P26097

**Entity Name:** COMPANIA PANAMENA DE AVIACION, S.A.**Current Principal Place of Business:**6205 BLUE LAGOON DR  
SUITE 200  
MIAMI, FL 33126**Current Mailing Address:**1313 PONCE DE LEON BLVD  
SUITE 201  
CORAL GABLES, FL 33134 US**FEI Number:** 98-0105127**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**AVIATION INDUSTRY CONSULTANTS LLC  
1313 PONCE DE LEON BLVD.  
SUITE 201  
CORAL GABLES, FL 33134 US*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:** MANUEL L RIVERO

04/10/2018

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title VP, DIRECTOR  
Name ARIAS A, RICARDO A  
Address CALLE FEDERICO BOYD,EDIFICIO SCOTIA  
City-State-Zip: PLAZA PISO 9, PANAMA AL 00000

Title DIRECTOR  
Name HEILBRON, ALVARO  
Address VIA ESPANA #200  
City-State-Zip: PANAMA

Title D, TREASURER  
Name ARIAS, C. JAIME  
Address CALLE FEDERICO BOYD,EDIFICIO SCOTIA  
City-State-Zip: PLAZA PISO 9, PANAMA AL 00000

Title SECRETARY, DIRECTOR, PRESIDENT  
Name HEILBRON, PEDRO  
Address COMPLEJO BUSINESS PARK-TORRE NORTE  
City-State-Zip: URB. COSTA DEL ESTE, PANAMA, AL 00000

Title PD, DIRECTOR  
Name MOTTA, STANLEY  
Address COMPLEJO BUSINESS PARK-TORRE SUR  
City-State-Zip: INV. BAHIA, PANAMA AL 00000

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.*

**SIGNATURE:** RICARDO A. ARIAS A.

VP DIRECTOR

04/10/2018

Electronic Signature of Signing Officer/Director Detail

Date