

**2005 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Jul 29, 2005 8:00 am**  
**Secretary of State**

07-29-2005 90015 029 \*\*\*550.00

**DOCUMENT # 845968**

1. Entity Name  
**SURINAAMSE LUCHTVAART MAATSCHAPPIJ N.V. (INC.)**



Principal Place of Business  
**LACHMONSTRAAT NO. 136  
 PARAMARIBO, SURINAM,**

Mailing Address  
**7270 NW 12TH STREET  
 SUITE 255  
 MIAMI, FL 33126**

**50058622**



07232005 No Chg-P CR2E034 (10/03)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number <b>59-1957030</b>	Applied For Not Applicable
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5. Certificate of Status Desired  **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

**SCHREIBER, GERHARDT A  
 2222 PONCE DE LEON BLVD.  
 PENTHOUSE SUITE  
 CORAL GABLES, FL 33134**

**DO NOT WRITE IN THIS SPACE**

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. I am familiar with, and accept the obligations of registered agent.

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

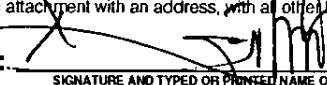
**FILE NOW!!! FEE IS \$550.00  
 Due by September 7, 2005**

9. Election Campaign Financing Trust Fund Contribution.  **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P JESSURUN, HENKIE D 6 PETER BRUNESLAAN PARAMARIBO, SURINAME,
TITLE NAME STREET ADDRESS CITY-ST-ZIP	M FUNG-LOY, GENE 12361 SW 144 TERRACE MIAMI, FL 33186
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(j), 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 10 or Block 11 if changed, or on an attachment with an address, with another I am empowered.

**SIGNATURE:**   
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**7-26-05**  
Date

Daytime Phone #

**ATTACHMENT**

# 845968  
52058622

**SURINAAMSE LUCHTVAQART MAATSCHAPPIJ N. V.  
INCORPORATED  
7270 NW 12<sup>TH</sup> STREET SUITE 255  
Miami, Florida 33126**

**July 22, 2005**

**Reference: Corporation Annual Report Renewal**

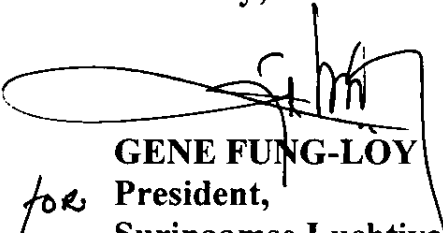
**To Whom It May Concern:**

**Attached you will find the application for the above-sited corporation request for renewal of the annual report along with a check for \$150.00.**

**It is herein requested that the penalty for late filing be waved because no notice of renewal was received from the State of Florida for this period.**

**This is the second year I did not receive the notice and will take greater effort to file this form timely in the future.**

**Sincerely;**



**GENE FUNG-LOY**

*for* **President,  
Surinaamse Luchtvaart Maatschappij N. V. Incorporated**

**2 Enclosures**

**as**