

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 845968

FILED
Apr 10, 2007
Secretary of State

Entity Name: SURINAAMSE LUCHTVAART MAATSCHAPPIJ N.V. (INC.)

Current Principal Place of Business:

7270 NW 12TH ST
SUITE 255
MIAMI, FL MIAMI

New Principal Place of Business:

7270 NW 12TH ST
SUITE 255
MIAMI, FL 33126

Current Mailing Address:

7270 NW 12TH STREET
SUITE 255
MIAMI, FL 33126 US

New Mailing Address:

FEI Number: 59-1957030 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

RODON-ALVAREZ, MARY-LOU
2222 PONCE DE LEON BLVD.
PENTHOUSE SUITE
CORAL GABLES, FL 33134 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: JESSURUN, HENKIE D
Address: 6 PETER BRUNESLAAN
City-St-Zip: PARAMARIBO, SURINAME,

Title: M () Delete
Name: FUNG-LOY, GENE
Address: 12361 SW 144 TERRACE
City-St-Zip: MIAMI, FL 33186

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: GENE FUNG-LOY

MR

04/10/2007

_____ Electronic Signature of Signing Officer or Director

_____ Date