2000 UNIFORM BUSINESS REPORT (UBR)

Jan 22, 2000 8:00 am Secretary of State DOCUMENT # **P97000057584** 1. Entity Name EXECJET CHARTER, INC. 01-22-2000 90076 037 ***158.75 Principal Place of Business Mailing Address 6363 NW 6TH WAY 2665 NW 56TH ST HANGER #18 **STE 400** 00007514 FT LAUDERDALE FL 33309-6188 FT LAUDERDALE FL 33309 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number 65-0799884 Not Applicable Country \$8.75 Additional Zip Zip Country Χ 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name CERAT NANCY L. MACINNES, DONALD A Street Address (P.O. Box Number is Not Acceptable) MORSE OPERATIONS, INC. C/O MORSE OPERATIONS, INC. 6363 NW 6TH WAY, SUITE 400 6363 NW 6TH WAY, SUITE 400 FT LAUDERDALE FL 33309 Zip Code 33309 FORT LAUDERDALE 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. 1/6/00 SIGNATURE (NOTE: Registered Agent signature required when reinstating) _Cera, Secretary FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2000 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE Change ☐ Addition ☐ Delete TITLE MORSE, EDWARD J JR NAME NAME STREET ADDRESS STREET ADDRESS -5500-N.W. 21ST-TERRAGE 6363 NW 6TH WAY, SUITE 400 CITY-ST-ZIP CITY-ST-ZIP FT-LAUDERDALE FL 83309 --FT. LAUDERDALE, FL 33309 x Addition Delete TITLE TITLE ☐ Change MACINNES, DONALD-A NAME NAME ERA, NANCY L. STREET ADDRESS STREET ADDRESS 5500 N.W. 21ST_TERRACE 5363 NW 6TH WAY, SUITE 400 CITY-ST-ZIP CITY-ST-ZIP FILAUDERDALE FL 33309 FT.': LAUDERDALE, FL 33309 TITLE VD ☐ Delete TITLE ☐ Change ☐ Addition BEAVER, RICHARD L NAME NAME 6363 NW 6TH WAY, SUITE 400 STREET ADDRESS STREET ADDRESS 5500 N.W. 21ST TERRACE FT. LAUDERDALE, FL 33309 CITY-ST-ZIP CITY-ST-ZIP PT_LAUDERDALE Ft 33309 TITLE Delete ☐ Change X Addition NAME LOVEJOY, WILLIAM----MORSE, EDWARD J. STREET ADDRESS STREET ADDRESS 5500 N.W. 21ST TERRAGE 6363 NW 6TH WAY, SUITE 400 CITY-\$T-ZIP CITY-ST-ZIP FT-LAUDERDALE FL 33309 TITLE ☐ Delete TITLE Change Addition NAME NAME MACINNES, DENNIS M. STREET ADDRESS STREET ADDRESS 6363 NW 6TH WAY, SUITE 400 CITY-ST-ZIP CITY-ST-ZIP FT. LAUDERDALE, FL 33309 ☐ Addition TITLE ☐ Delete TITLE ☐ Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP

FILED

13. I 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 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 11 or Block 12 if

changed, or on an attachment with an address, with all other like empowered.