

**2017 FLORIDA PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# P13000019401

**Entity Name:** TAME AIRLINES, INC.

**Current Principal Place of Business:**

750 SW 34TH STREET  
SUITE 209  
FORT LAUDERDALE, FL 33315

**Current Mailing Address:**

750 SW 34TH STREET  
SUITE 209  
FT. LAUDERDALE, FL 33315 US

**FEI Number:** 46-2164455

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

BENINCASA AZUA, JAIME  
750 SW 34TH STREET  
STE 209  
FORT LAUDERDALE, FL 33315 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:** JAIME BENINCASA AZUA

03/18/2017

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title CEO  
Name GONZALEZ CAJAS, CHRISTIAN PAUL  
Address JUAN LEON MERA N26-220 Y AVE  
ORELLANA  
City-State-Zip: QUITO, ECUADOR

Title CFO  
Name SORIA, DANIEL GONZALO  
Address MELCHOR VALDEZ OE9195 PB 69  
MARTIN OCHOA CONJUNTO  
MIRADOR DEL BOSQUE  
City-State-Zip: QUITO

Title TREASURER  
Name PAREDES, LILET ALEXANDRA  
Address AVENIDA LUIS TRUFINO Y  
FRANCISCO MARCOS N58-177  
City-State-Zip: QUITO

Title DIRECTOR  
Name CARDENAS, PATRICIO VINICIO  
Address ALCIDEZ ENRIQUEZ OE2-265 Y  
AVENIDA 5 DE JUNIO  
City-State-Zip: QUITO

Title ADMINISTRATION AND FINANCE  
MGR, USA  
Name BENINCASA AZUA, JAIME  
Address 750 SW 34TH STREET  
STE 209  
City-State-Zip: FORT LAUDERDALE FL 33315

*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:** JAIME BENINCASA AZUA

ADMINISTRATION AND  
FINANCE MGR, USA

03/18/2017

Electronic Signature of Signing Officer/Director Detail

Date