FILED

2002 UNIFORM BUSINESS REPORT (UBR)

Sep 22, 2002 8:00 am Secretary of State DOCUMENT # 804895 1. Entity Name 09-22-2002 90069 033 ***150 00 EASTERN AIR LINES, INC. Principal Place of Business Mailing Address 1221 BRICKELL AVE 1221 BRICKELL AVE SUITE 1780 **SUITE 1780** MIAMI FL 33131 **MIAMI FL 33131** US 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 13-0655310 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent BEVANS, RONALD T., JR. Street Address (P.O. Box Number is Not Acceptable) 1221 BRICKELL AVE **SUITE 1780 MIAMI FL 33131** Zip Code 8. The at even amed 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 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing Tax filing requirement and elects to do so. \$5.00 May Be After September 13, 2002 Fee will be \$750.00 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 ☐ Delete TITLE ☐ Change ☐ Addition NAME SICILIAN, JOHN J NAME STREET ADDRESS 1221 BRICKELL AVE SUITE 1780 STREET ADDRESS CITY-ST-ZIP MIAM! FL 33131 CITY-ST-ZIP TITLE Delete TITLE Addition Change NAME DANIEL BARBARA J NAME STREET ADDRESS 1221 BRICKELL AVE STE 1780 STREET ADDRESS CITY-ST-ZIP MIAMI FL 33131 CITY-ST-ZIP TITLE ☐ Delete TITLE Change ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Addition Change | NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP TITLE Delete TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 13. I hereby certify that the information supplied with this filling 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 given like empowered.

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

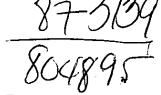
THE REQUIRE John J. Sicilian 9/14/02 305.536.2246

RE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Descriptor Proces





EASTERN

Eastern Air Lines, Inc. 1221 Brickell Avenue • Suite 1780 Miami, FL 33131-3259 (305) 536-2246

September 19, 2002

Florida Department of State Division of Corporations Uniform Business Report Filings PO Box 1500 Tallahassee, FL 32302-1500

RE: 2002 Uniform Business Report

To Whom it May Concern:

The Corporation did not receive a prior notice of this filing. We respectfully request that the late fees be waived, and we submit herewith the original filing fee.

Thank you in advance for your consideration.

John J. Sicilian

President