2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# F00000006517

Entity Name: SOUTH AFRICAN AIRWAYS (PTY) LTD. (INC)

FILED Feb 24, 2003 Secretary of State

Current Principal Place of Business:			New P	New Principal Place of Business:		
515 E. LAS 16TH FL	OLAS BLVD RDALE, FL 333			•		
Current Mailing Address:				New Mailing Address:		
515 E. LAS OLAS BLVD 16TH FL FT LAUDERDALE, FL 33301						
FEI Number:	65-0906850	FEI Number Applied For ()	FEI Number Not	Applicable ()	Certificate of Status Desired (X)	
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:		
515 E. LAS OLAS BLVD., FT LAUDERDALE, FL 33301 US				ELLINGER, MARK D 515 E. LAS OLAS BLVD., SUITE 1600 FT LAUDERDALE, FL 33301 US		
The above in the State		bmits this statement for the pur	pose of changi	ng its registered o	office or registered agent, or both,	
SIGNATURE: MARK ELLINGER					02/24/2003	
	Electronic	Signature of Registered Agent	t		Date	
	paign Financing 1	rust Fund Contribution(). DRS:	ADDIT	IONS/CHANGES	TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	C () D NCUBE, DMJ TRANSNET PARK PARKTOWN, SA	(, 8 HILLSIDE RD	Title: Name: Address: City-St-Z) Change ()Addition	
Title: Name: Address: City-St-Zip:	PCEO () D VILJOEN, ANDRE AIRWAYS PARK JOHANNESBURG	N	Title: Name: Address: City-St-Z) Change ()Addition	
Title: Name: Address: City-St-Zip:	D () D MKWANAZI, ME TRANSET PARK, PARKTOWN, SA		Title: Name: Address: City-St-Z) Change ()Addition	
Title: Name: Address: City-St-Zip:	D () D SEROBE, G T TRANSNET PARK PARKTOWN, SA		Title: Name: Address: City-St-Z	,) Change ()Addition	
Title: Name: Address: City-St-Zip:	D () D SIBIYA, B L TRANSET PARK, PARKTOWN, SA		Title: Name: Address: City-St-Z) Change ()Addition	
Title: Name: Address: City-St-Zip:	D () D ELLINGER, M D 515 E LAS OLAS FT LAUDERDALE		Title: Name: Address: City-St-Z	` ') Change ()Addition	

I hereby certify that the information supplied with this filing does not qualify for the 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 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: MARK D. ELLINGER EVP 02/24/2003