

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Murdick
Secretary of State
Division of Corporations

APPROVED
AND
FILED

95 MAY -1 AM 8:07

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **F93000004065 (9)**

1. Corporation Name

FAST AIR CARRIER, S.A.

Principal Place of Business

Mailing Address

**6571 N.W. 18TH STREET, BLDG #2143
MIAMI FL 33126**

**6571 N.W. 18TH STREET, BLDG #2143
MIAMI FL 33126**

DO NOT WRITE IN THIS SPACE

3. Date incorporated or Chartered

09/02/1993

3a. Date of last Report

04/12/1994

4. FEI Number

59-1867808

Applied For

Not Applicable

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing

Trust Fund Contribution

☐

**\$5.00 May Be
Added to Fees**

6. This Corporation has liability for intangible tax under the Florida Statutes

☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**AMKGS REGISTERED AGENTS INC
1980 SUNBANK INTERNATIONAL CTR
1 SE 3 AVE
MIAMI FL 33131**

81. Name

82. Street Address (P.O. Box Number is Not Acceptable)

83.

84. City

FL

85. Zip Code

11. Pursuant to the provisions of Sections 607.050, 607.051, and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 607.0506, Florida Statutes.

SIGNATURE

Signature of Registered Agent or Registered Agent's Representative (If Registered Agent is a corporation, the signature of an officer or director of the corporation must be provided.)

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

12.1	CP
NAME	CUETO, ENRIQUE
STREET ADDRESS	APOGUINDO 4944
CITY, ST, ZIP	SANTIAGO, CHILE
12.2	VCVP
NAME	CUETO, IGNACIO
STREET ADDRESS	APOGUINDO 4944
CITY, ST, ZIP	SANTIAGO, CHILE
12.3	D
NAME	VIDELA, LUIS E
STREET ADDRESS	APOGUINDO 4944
CITY, ST, ZIP	SANTIAGO, CHILE
12.4	AVD
NAME	RAMIREZ, ERNESTO E
STREET ADDRESS	APOGUINDO 4944
CITY, ST, ZIP	SANTIAGO, CHILE
12.5	VD
NAME	VALDIVIESO, ARMANDO
STREET ADDRESS	6571 NW 18TH STREET BUILDING 2143
CITY, ST, ZIP	MIAMI FL 33126
12.6	DV
NAME	HIDALGO, RODRIGO
STREET ADDRESS	6571 NW 18TH STREET BUILDING 2143
CITY, ST, ZIP	MIAMI FL 33126

13.1	NAME	☐ Change ☐ Addition
13.2	NAME	
13.3	STREET ADDRESS	
13.4	CITY, ST, ZIP	
13.5	NAME	☐ Change ☐ Addition
13.6	NAME	
13.7	STREET ADDRESS	
13.8	CITY, ST, ZIP	
13.9	NAME	☐ Change ☐ Addition
13.10	NAME	
13.11	STREET ADDRESS	
13.12	CITY, ST, ZIP	
13.13	NAME	☐ Change ☐ Addition
13.14	NAME	
13.15	STREET ADDRESS	
13.16	CITY, ST, ZIP	

14. I am hereby certifying that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Sections 139.01(1)(b), Florida Statutes. I further certify that the information is based on the annual report or supplemental annual report as 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 187, Florida Statutes, and that my name appears in Block 12 or Block 13 of this report, or on an attachment with an address.

SIGNATURE:

RODRIGO HIDALGO

04-20-1995

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR