Apr 14, 1999 8:00 am Secretary of State

04-14-1999 90139 024 ***150.00

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # F9500000224

1. Corporation Name

AIR JAMAICA HOLDINGS LIMITED CO.

Principal Place of Business Mailing Address 72-76 HARBOUR ST. 72-76 HARBOUR ST. KINGSTON JAMAICA WEST INDIES DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed 01/12/1995 2. Principal Place of Business 2a. Mailing Address 4. FEI Number 98-0150241 Applie 98-0150241	
KINGSTON JAMAICA WEST INDIES DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed 01/12/1995 2. Principal Place of Business 4. FEI Number Applie	•
KINGSTON JAMAICA WEST INDIES DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed 01/12/1995 2. Principal Place of Business 4. FEI Number Applie	-
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[21] [26] [OU (OUET) [] [(WAY)	pplicable
Suite Apt # etc Suite Apt # etc \$8.75 Add	
22 5. Certificate of Status Desired Fee Requi	- 1
City & State City & State 6. Election Campaign Financing 5.00 Ma	v Be
23 Trust Fund Contribution Added to F	
Zip Country Zip Country 8. This corporation owes the current year intangible	1
[24]	No
9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent	
CORPORATION SERVICE COMPANY	
1201 HAYS ST. 82 Street Address (P.O. Box Number is Not Acceptable)	-
Allere AAF	
SUITE 105 TALLAHASSEE FL 32301	
84 City FL 85 Zip Cod	e
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its reg	istared
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 regist agent, i am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.	ered
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE	 }
12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	IN 12
TITLE P DELETE 1.1 TITLE Change	☐ Addition }
NAME ZACCA, CHRISTOPHER 12 NAME	
STREET ADDRESS 72-76 HARBOUR ST 1.3 STREET ADDRESS	1
CITY-ST-ZIP KINGSTON JA 1.4 CITY-ST-ZIP	
TITLE V DELETE 2.1 TITLE Change	☐ Addition \
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14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

□ DELETE

SIGNATURE:

MCLEAN, PAMELA

72 HARBOUR ST.

KINGSTON

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

JRERECIIDED
LIEGAL OFFI CER/COMPANY SECRETARY 14.3.99
NAME OF SIGNING OFFICER OR DIRECTOR
Date

☐ Change

☐ Addition