FILED **2002 UNIFORM BUSINESS REPORT (UBR)** May 12, 2002 8:00 am § Secretary of State DOCUMENT # F97000005002 1. Entity Name 05-12-2002 90646 007 ***150 00 AVIATRIX AN AIRLINE CONSULTING COMPANY Principal Place of Business Mailing Address THE JET CENTER AVIATRIX. THE JET CENTER 1100 LEE WAGENER BLVD 1100 LEE WAGENER BLVD FT LAUDERDALE FL 33315 FT LAUDERDALE FL 33315 US 2. Principal Place of Business MAJORCA CLDY Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State Gity & State 4. FEI Number Applied For 52-2049876 Soca Not Applicable \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent MORGAN-RICH, LESLEY 7921 PALACIO DEL MAR **BOCA RATON FL 33433** 8. 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 (NOTE: Registered Agent signature required when reinstating 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After May 1, 2002 Fee will be \$550.00 Trust Fund Contribution. \Box 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 CR2E034 (9/01) ☐ Addition MORGAN-RICH, LESLEY NAME NAME 7921 PALACIO DEL MAR STREET ADDRESS STREET ADDRESS **BOCA RATON FL 33433** CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ 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 TITLE ☐ Delete TITLE Change ☐ Addition NAME 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 filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes: Efurther 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 other like empowered.

SIGNATURE: (POLLY MONOW PRIOR OF DIRECTION OFFICER OR DIRECTION OF THE PRIOR OF

Y-114-02

.... Daytime Phone #