2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# F97000005893

Address:

City-St-Zip:

8750 N.W 36 ST, SUITE 300

DORAL, FL 33178 US

FILED Jun 10, 2<u>00</u>9 Secretary of State

Entity Name: MARTINAIR HOLLAND, N.V. **Current Principal Place of Business: New Principal Place of Business:** 8750 NW 36 ST, SUITE 300 DORAL, FL 33178 **Current Mailing Address: New Mailing Address:** 8750 NW 36 ST, SUITE 300 DORAL, FL 33178 FEI Number: 13-3178313 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: JARVIS & ASSOCIATES, P.A. 283 CATALONIA AVENUE SUITE 200 CORAL GABLES, FL 33134 US 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. SIGNATURE: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: CFO () Delete Title: () Change () Addition GREGOROWITSCH, PAUL Name: Name: PO BOX 7507 Address: Address: City-St-Zip: SCHIPHOLAIRPORT, NETHERLANDS, NH 1118 ZG NL City-St-Zip: Title: Title: () Delete () Change () Addition Name: RONALD, VAN DE GEER Name: 8750 N.W 36 ST, SUITE 300 Address: Address: **DORAL, FL 33178 US** City-St-Zip: City-St-Zip: () Delete Title: Title: CFO CFO (X) Change () Addition DE FLUITER, ROBERT Name: HOUGEE, ROBERT Name: PO BOX 7507 PO BOX 7507 Address: Address: City-St-Zip: SCHIPOL AIRPORT, NETHERLANDS, NH 1118 ZG NL City-St-Zip: SCHIPOL AIRPORT, NETHERLANDS, NH 1118 ZG NL Title: SRVP () Delete Title: () Change () Addition SCHOLTEN, PETER Name: Name:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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.

Address:

City-St-Zip:

SIGNATURE: RONALD VAN DE GEER D 06/10/2009