PROFIT A PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

1. Corporation Name F98000004205

VIRGIN AEROSTATIONS, INC.

EFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

Aug 03, 1999 8:00 am Secretary of State 08-03-1999 90001 038 ***550.00

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| 2. Principal | Place of Business | 2a. Mailing Address | | <u> </u> | 4 FF | /23/1998 | | . | 1. " := |
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| | | | | 81 Nam | | ine and Address of New | Registered A | agent | |
| COF | RPORATION SERVICE COMPA | ANY | | <u>l L</u> | | | | | |
| | 1 HAYS STREET | | • | 82 Stree | t Address (P.O. | Box Number is Not Accept | table) | | |
| TALL | LAHASSEE FL 32301-2525 | | | 83 | | | | | |
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| • | | | i | 84 City | | | | 85 2 | Zip Code |
| 11. Pursuan | nt to the provisions of sections 607 | | | | | | FL | 1 1 | • |
| SIGNATURE | registered agent, or both, in the sam familiar with, and accept the control of the same familiar with and accept the control of the same familiar with and accept the same familiar with a same famili | | | | | • | | | |
| | Signature, typed or printed name of registere | ed agent and title if applicable | NOTE: Register | red Agest eigen | tura tampirad phas sai- | 1.6.1 | | | |
| | Signature, typed or printed name of registere OFFICERS | | | red Agent signa | ture required when rein | | DATE | 20050 | 7000 111 40 |
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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 in Block 12 or Block 13 if changed, or on an attachment with an address.