

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F98000005267

FILED  
Apr 30, 2004  
Secretary of State

Entity Name: STAF AIRLINES, S.A.

## Current Principal Place of Business:

P.O. BOX 522300  
MIAMI, FL 33152

## New Principal Place of Business:

## Current Mailing Address:

2121 PONCE DE LEON  
240  
CORAL GABLES, FL 33134

## New Mailing Address:

FEI Number: 52-2044807      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

PRATS, GABRIEL  
2121 PONCE DE LEON BLVD SUITE 240  
CORAL GABLES, FL 33134      US

## Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: REY, ALFONSO  
Address: 1851 N.W. 68TH AVENUE, BLDG 706 STE A225  
City-St-Zip: MIAMI, FL 33122

Title: V ( ) Delete  
Name: DONADO, CARLOS  
Address: 1851 N.W. 68TH AVENUE, BLDG 706 STE A225  
City-St-Zip: MIAMI, FL

Title: S ( ) Delete  
Name: PACITTI, PHIL  
Address: 1851 N.W. 68TH AVENUE, BLDG 706 STE A225  
City-St-Zip: MIAMI, FL

Title: D ( ) Delete  
Name: BARETTA, FRANCISCO O  
Address: 15 PADRE BEAUVIOR  
City-St-Zip: ARGENTINA,

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: BARLETTA, ORLANDO  
Address: 1851 N.W. 68TH AVENUE, BLDG 706 STE A225  
City-St-Zip: MIAMI, FL 33122

Title: V (X) Change ( ) Addition  
Name: REY, ARNALDO  
Address: 1851 N.W. 68TH AVENUE, BLDG 706 STE A225  
City-St-Zip: MIAMI, FL 33122

Title: S (X) Change ( ) Addition  
Name: GALASIO, EDUARDO  
Address: 1851 N.W. 68TH AVENUE, BLDG 706 STE A225  
City-St-Zip: MIAMI, FL 33122

Title: D (X) Change ( ) Addition  
Name: DEL BUONO, HECTO  
Address: 1851 N.W. 68TH AVE BLDG 706 STE A225  
City-St-Zip: MIAMI, FL 33122

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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.

SIGNATURE: BARLETTA ORLANDO

P

04/30/2004

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date