

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

FILED

04 APR 27 PM 1:34

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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05/06/04--01016--012 \*\*1208.75

REINSTATEMENT 01-04

|                                                                                                                                                                                |  |                                                                                                                                                                              |  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| <b>CORPORATION<br/>REINSTATEMENT</b>                                                                                                                                           |  |  <b>FLORIDA DEPARTMENT OF STATE<br/>Secretary of State<br/>DIVISION OF CORPORATIONS</b>     |  |
| <b>DOCUMENT #</b> F99000005417                                                                                                                                                 |  |                                                                                                                                                                              |  |
| <b>1. Corporation Name</b><br>JET AVIATION HOLDINGS, INC                                                                                                                       |  |                                                                                                                                                                              |  |
| <b>2. Principal Office Address</b><br>113 CHARLES A LINDBERGH DRIVE<br>Suite, Apt. #, etc.<br>ATTN: OFFICE OF THE CFO<br>City & State<br>TETERBORO, NEW JERSEY<br>Zip<br>07608 |  | <b>3. Mailing Office Address</b><br>113 CHARLES A LINDBERGH DRIVE<br>Suite, Apt. #, etc.<br>ATTN: OFFICE OF THE CFO<br>City & State<br>TETERBORO, NEW JERSEY<br>Zip<br>07608 |  |

|                                                                                                                                                   |                                      |
|---------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------|
| <b>4. Date Incorporated or Qualified<br/>To Do Business in Florida</b> 6/22/1988                                                                  |                                      |
| <b>5. FEI Number</b><br>04-3030517                                                                                                                | <b>Applied For</b><br>Not Applicable |
| <b>6. CERTIFICATE OF STATUS DESIRED</b> <input checked="" type="checkbox"/> <b>\$8.75 Additional Fee required<br/>for a Certificate of Status</b> |                                      |

|                                                                        |             |                        |
|------------------------------------------------------------------------|-------------|------------------------|
| <b>7. Name and Address of Current Registered Agent</b>                 |             |                        |
| Name<br>CORPORATION SERVICE COMPANY                                    |             |                        |
| Street Address (P.O. Box Number is Not Acceptable)<br>1201 HAYS STREET |             |                        |
| Suite, Apt. #, Etc.                                                    |             |                        |
| City<br>TALLAHASSEE                                                    | State<br>FL | Zip Code<br>32301-2525 |

**8.** I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of  
Registered Agent

*Elizabeth B. Komieczny*  
REGISTERED AGENT MUST SIGN

Date

4-26-04

**9. Names and Street Addresses of Each Officer and/or Director** (Florida nonprofit corporations must list at least 3 directors)

| Titles | Name of<br>Officers and/or Directors | Street Address of Each<br>Officer and/or Director | City / State / Zip        |
|--------|--------------------------------------|---------------------------------------------------|---------------------------|
| P/D    | THEO STAUB                           | 112 CHARLES A LINDBERGH DRIVE                     | TETERBORO, NJ 07608       |
| V/D    | ERIC MONTGOMERY                      | 112 CHARLES A LINDBERGH DRIVE                     | TETERBORO, NJ 07608       |
| S      | MICHAEL GREGORY                      | 1515 PERIMETER ROAD                               | WEST PALM BEACH, FL 33406 |
| T      | WILLIAM BEUKA                        | 113 CHARLES A LINDBERGH DRIVE                     | TETERBORO, NJ 07608       |
|        |                                      |                                                   |                           |
|        |                                      |                                                   |                           |

**10.** I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

**SIGNATURE:**

*Eric Montgomery*

ERIC MONTGOMERY

4/20/2004

(201) 462-4025

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E081 (10/02)