

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K36561

FILED
Apr 02, 2004
Secretary of State

Entity Name: GULFSTREAM INTERNATIONAL AIRLINES, INC.

Current Principal Place of Business:

1815 GRIFFIN ROAD
SUITE 400
DANIA, FL 33004 US

New Principal Place of Business:

Current Mailing Address:

1815 GRIFFIN ROAD
SUITE 400
DANIA, FL 33004 US

New Mailing Address:

FEI Number: 65-0081720 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

COOPER, THOMAS P
1815 GRIFFIN ROAD
SUITE 400
DANIA, FL 33004

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: PVDC () Delete
Name: COOPER, THOMAS L.,
Address: 15790 LINDBERGH LANE
City-St-Zip: WEST PALM BEACH, FL 33414

Title: STD () Delete
Name: COOPER, THOMAS P
Address: 2458 SE 11TH STREET
City-St-Zip: POMPANO BEACH, FL 33062

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DC (X) Change () Addition
Name: COOPER, THOMAS L.,
Address: 15790 LINDBERGH LANE
City-St-Zip: WEST PALM BEACH, FL 33414

Title: SD (X) Change () Addition
Name: COOPER, THOMAS P
Address: 2458 SE 11TH STREET
City-St-Zip: POMPANO BEACH, FL 33062

Title: PT () Change (X) Addition
Name: HACKETT, DAVID
Address: 1815 GRIFFIN RD, SUITE 400
City-St-Zip: DANIA, FL 33004 US

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: THOMAS P. COOPER

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04/02/2004

Electronic Signature of Signing Officer or Director

Date