FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

FILED Mar 02 1998 8:00am Secretary of State

ROU*	IMENT # K486 TE AIR SERVICES, INC. ce of Business 34TH STREET	Mailing Address 7301 NW 34TH STRE	ET			
MIAMI PL	001E6	MIAMI FL 33122			DO NOT WRITE IN 1	THIS SPACE
					3. Date Incorporated or Qualified 12/01/1988	
2. Principal I	Place of Business	2a. Mailing Address			4. FEI Number	Applied For
21		26			65-0118840	Not Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc.					5. Certificate of Status Desired	\$8.75 Additional
22						Fee Required
23		28			6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Zip	Country		8. This corporation owes or has paid th	e current year Intangible
24	25 25 9. Name and Address of Curre	29 ent Registered Agent	30		Personal Property Tax due June 30. 10. Name and Address of New Registe	Yes No
		ont negratored Agent	81	lame	10. Haille and Address of New Degiste	neu Agent
	.OWENSTEIN, ELLIOTT 2100 SALZEDO ST		1-1.			
STE 303			62 S	Street Addr	ess (P.O. Box Number is Not Acceptable)	
	CORAL GABLES, 33134		83			
	7017 E 0101E0; 00101		-			
			84 0	City		FL 85 Zip Code
11. Pursuant	to the provisions of Sections 607.05	02 and 607.1508, Florida Statu	ites, the above-n	amed corp	oration submits this statement for the purpo ion's board of directors. I hereby accept the	se of changing its registered
agent. I a	registered agent, or both, in the Stat am f a miliar with, and accept the obli	gations of, Section 607.05 0 5, F	i authorizeo by th Torida Statutes.	e corporati	on's board of directors. I hereby accept the	appointment as registered
SIGNATURE						
12.	Signature, typed or printed name of registered as	gent and title if applicable [NO ND DIRECTORS	11E: Registered Agent si	ignature require	ed when reinstating) D/ ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 12
TOLE	D	DELETE	1.1 TITLE		ADDITIONS/CHANGES TO OFFICERS	Change Addition
NAME	JACKSON, PETER		1.2 NAME			
STREET ADDRESS	BERONIAL WAY ALMON AIR		1.3 STREET ADD	RESS		
CITY-ST-ZIP	LUTON, BEDFORDSHIRE		1.4 CITY - ST - ZI			
TITLE	D	☐ DELETE	2.1 TITLE			☐ Change ☐ Addition
NAME	WILSON, STEPHEN GARY		2.2 NAME			
STREET ADDRESS	25 ELIZABETH AVE.		2.3 STREET ADD	RESS		
CITY-ST-ZIP	BAGSHOT, SURREY ENG.		2.4 CITY-ST-Z			
TITLE		☐ DELETE	3.\$ TITLE	S		Change XAddition
NAME			3.2 NAME		P. McKINNON	
STREET ADORESS			3.3 STREET ADD		301 NW 34TH STREET	
CITY-ST-ZIP		DELETE	3.4. CITY-ST-Z	IP M	IIAMI, FL 33122	
TITLE NAME			4.1 TITLE			Change Addition
STREET ADORESS			4. 2 NAME 4.3 STREET ADD	DECC .		
CITY-ST-ZIP						
TITLE		☐ DELET E	4.4 CITY - ST - ZII 5.1 TITLE			☐ Change ☐ Addition
NAME		, -	5.2 NAME			
STREET ADDRESS			5.3 STREET ADD	RESS		İ
CITY-ST-ZIP			5.4 City-St-Zi	- !		
TITLE		☐ DELETE	6.1 TITLE			Change Addition
NAME			6.2 NAME	.		
STREET ADDRESS			6.3 STREET ADD	RESS		
CITY-ST-ZIP			6.4 CITY - ST- ZIF	•]		
14 I bereby r	ertify that the information supplied v	with this filing does not qualify t	or the everention	stated in 9	Section 119 07(3)(i) Florida Statutes I furthe	or cortify that the information

Thereby certify that the information supplied with this filling does not quality for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information indicated on this annual report is true and accurate and that my signature shall have the same legal effect as if made under cath; 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

5011-11949