

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# L02000030524

FILED
Jan 16, 2003
Secretary of State

Entity Name: CAV-AIR JETS LLC

Current Principal Place of Business:

DAVIDSON HOUSE, GADBROOK PARK
NORWICH, CHESHIRE
UNITED KINGDOM CW9 7TW,

Current Mailing Address:

DAVIDSON HOUSE, GADBROOK PARK
NORWICH, CHESHIRE
UNITED KINGDOM CW9 7TW,

New Principal Place of Business:

HANGAR 50,
2011 S PERIMETER ROAD, SUITE L
FORT LAUDERDALE, FL 33309 US

New Mailing Address:

DAVIDSON HOUSE, GADBROOK PARK
NORWICH, CHESHIRE
UNITED KINGDOM, UK CW9 7TW UK

FEI Number:

FEI Number Applied For (X)

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 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

MANAGING MEMBERS/MEMBERS:

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

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

ADDITIONS/CHANGES:

Title: MGRM () Change (X) Addition
Name: CAV-AIR HOLDINGS INC.,
Address: HANGAR 50, 2011 S PERIMETER ROAD, SUITE L
City-St-Zip: FORT LAUDERDALE, FL 33309 US

Title: MGR () Change (X) Addition
Name: CARABAJAL, GUILLERMO MR
Address: HANGAR 50, 2011 S PERIMETER ROAD, SUITE L
City-St-Zip: FORT LAUDERDALE, FL 33309 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 is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: GUILLERMO CARABAJAL

MGR

01/16/2003

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date