FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT 1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 FEB 28 PM 3:46

DOCUMENT # L52150 (4)

1. Corporation Name
MIAMI AIR INTERNATIONAL, INC.

Principal Place of Business	Mailing Address
7205 CORPORATE CENTER DR SUITE 302 MIAMI FL 33126-2041 US	7205 CORPORATE CENTER DR SUITE 302 MIAMI FL 33126-2041 US

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: 02/22/1990
3a. Date of Last Report: 02/08/1994

2. Principal Place of Business
21 5000 NW 36 ST.
Suite, Apt. #, etc.
22 SUITE 307
City & State
23 MIAMI, FL
Zip
24 33122
Country
25 USA

2a. Mailing Address
26 P.O. BOX 660880
Suite, Apt. #, etc.
27
City & State
28 MIAMI SPRINGS, FL
Zip
29 33266
Country
30 USA

4. FEI Number: 65-0174270 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

O'NAGHTEN, JUAN T
2665 S BAYSHORE DR
SUITE 1100 GRAND BAY PLAZA
MIAMI FL 33133

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE ____________________
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DT	1 1 TITLE	☒ Change ☐ Addition
NAME	KORNMEYER, JOHN	1 2 NAME	
STREET ADDRESS	7205 CORPORATE CENTER DR	1 3 STREET ADDRESS	5000 NW 36 ST
CITY-ST-ZIP	MIAMI FL	1 4 CITY-ST-ZIP	
TITLE	DC	2 1 TITLE	☒ Change ☐ Addition
NAME	LYALL, GEORGE	2 2 NAME	
STREET ADDRESS	7205 CORPORATE CENTER DR	2 3 STREET ADDRESS	5000 NW 36 ST
CITY-ST-ZIP	MIAMI FL	2 4 CITY-ST-ZIP	
TITLE	D	3 1 TITLE	☒ Change ☐ Addition
NAME	O'NAGHTEN, JUAN T.	3 2 NAME	
STREET ADDRESS	7205 CORPORATE CENTER DR	3 3 STREET ADDRESS	5000 NW 36 ST
CITY-ST-ZIP	MIAMI FL	3 4 CITY-ST-ZIP	
TITLE	DP	4 1 TITLE	☒ Change ☐ Addition
NAME	FISCHER, D. ROSS	4 2 NAME	
STREET ADDRESS	7205 CORPORATE CENTER DR	4 3 STREET ADDRESS	5000 NW 36 ST
CITY-ST-ZIP	MIAMI FL	4 4 CITY-ST-ZIP	
TITLE	D	5 1 TITLE	☒ Change ☐ Addition
NAME	HASFERRER, E.	5 2 NAME	
STREET ADDRESS	7205 CORPORATE CENTER DR	5 3 STREET ADDRESS	5000 NW 36 ST
CITY-ST-ZIP	MIAMI FL	5 4 CITY-ST-ZIP	
TITLE	S	6 1 TITLE	☒ Change ☐ Addition
NAME	PETERSON, LOIS H.	6 2 NAME	
STREET ADDRESS	7205 CORPORATE CENTER DR	6 3 STREET ADDRESS	5000 NW 36 ST
CITY-ST-ZIP	MIAMI FL	6 4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: [signature]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
JOHN R. KORNMEYER

2/23/95 Date
305-871-3300 Daytime Phone #

0184000 CP