FILED

²2001 UNIFORM BUSINESS REPORT (UBR)

Apr 02, 2001 8:00 am Secretary of State DOCUMENT # L52150 1. Entity Name MIAMI AIR INTERNATIONAL, INC. 04-02-2001 90064 046 ***158.75 Principal Place of Business Mailing Address 5000 NW 36THSTREET P O BOX 660880 639655 SUITE 307 SUITE 302 MIAMI FL 33122 MIAMI SPRINGS FL 33266 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 65-0174270 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name O'NAGHTEN, JUAN T Street Address (P.O. Box Number is Not Acceptable) 2665 S BAYSHORE DR SUITE 1100 GRAND BAY PLAZA **MIAMI FL 33133** City Zip Code 8. 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 Signature, typed or printed name of registered agent and title if applicable, (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 11. 12. President & C.E.D. Douglas R. Fischer CR2E034 (10/00) TITLE Delete NAME FITZGERALD, BRIAN 90 SW 127Th St STREET ADDRESS STREET ADDRESS 13590 SW 67 CT CITY-ST-ZIP CITY-ST-ZIP lami, 71 MIAMI FL 33156 Change TITLE ☐ Delete TITLE es Crane VP0 NAME NAME PROIA, JAMS 50 VICILLY Dr. STREET ADDRESS STREET ADDRESS 3600 WASHINGTON LA CITY-ST-ZIP touston, Tx CITY-ST-ZIP 77032 COOPER CITY FL ☐ Delete TITLE Member ☐ Change Addition DIR 110 Serrano NAME NAME GIURTINO, CHARLES Sp Vidury DR. STREET ADDRESS STREET ADDRESS 7780 SW 143RD ST CITY-ST-ZIP CITY-ST-7IP MIAMI FL 33158 ☐ Delete Change Addition TITLE TITLE Moraan NAME NAME CONSERV, ROBERT STREET ADDRESS STREET ADDRESS 5000 NW 36TH ST CITY-ST-ZIP CITY-ST-7IP ouis, MO 63141 MIAMI FL 33266 Delete TITLE DIR TITLE Change Addition NAME NAME KORNMEYER, JOHN STREET ADDRESS STREET ADDRESS 6551 NEW PORT LAKE CIRCLE CITY-ST-ZIP CITY-ST-ZIP BOCA RATON FL 3346 TITLE maintenance TITLE ☐ Change ☐ Addition *Addition* NAME STREET ADDRESS STREET ADDRESS CITY-ST-7iP CITY-ST-ZIP

13. I hereby certify that the information supplied with this filing does not qualify 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 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3.26-01

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Daytime Phone #