2005 FOR PROFIT CORPORATION **ANNUAL REPORT**

May 04, 2005 8:00 am Secretary of State DOCUMENT # L52150 05-04-2005 90110 015 ***150.00 1. Entity Name MIAMI AIR INTERNATIONAL, INC. Principal Place of Business Mailing Address 5000 NW 36THSTREET P 0 BOX 660880 SUITE 307 **SUITE 307** MIAMI SPRINGS, FL 33266 US MIAMI, FL 33122 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc 04262005 CR2E034 (10/03) City & State City & State Applied For 4. FELNumber 65-0174270 Not Applicable Zìo Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required - - 6. Name and Address of Current Registered Agent /. Name and Address of New Registered Agent . D'NAGHTEN T NAW O'NAGHTEN, JUAN T Street Address (P.O. Box Number is Not Acceptable) 2665 S BAYSHORE DR SUITE 1100 GRAND BAY PLAZA 2950 500 27 HQUENUE MIAMI, FL 33133 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 Fiorida. I am familiar with, and accept the obligations of registered agent SIGNATURE (NOTE: Registered Agent signature required when reinstating) registered agent and title if applicable 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. After May 1, 2005 Fee will be \$550.00 Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. HS AT VPO TITLE Delete TITLE ☐ Change Addition PAlmer, gohn 1031 Executive PARKWay NAME PROIA, JAMES NAME 3600 WASHINGTON LA STREET ADDRESS STREET ADDRESS Saint Louis, MD 1341 CITY-ST-ZIP COOPER CITY, FL CITY-ST-ZIP MAN CEOP ☐ Change Addition Delete Ostendorp, Thomas 5000 No 36 Street, Suite 307 FISCHER, DOUGLAS R NAME NAME STREET ADDRESS 7690 SW 127 STREET STREET ADDRESS MIAMI, FL 33156 CITY-ST-ZIP MIAMI, FL 33122 CITY-ST-ZIP UPHR RAYDA, FRANK 5000 NOW 36 STREET, SUITE 307 MIAMI, FL 33122 TITLE TIT! F T Change Addition CONSER, ROBERT NAME NAME STREET ADDRESS 5000 NW 36TH ST STREET ADDRESS CITY-ST-7IP MIAMI, FL 33266 CITY-ST-ZIP ☐ Delete MZGU TITLE RM TITLE Change Addition MORGAN, JAMES HACKERT, MICHAEL STREET ADDRESS 1031 EXCUTIVE PARKWAY STREET ADDRESS 5000 NW 36 Stafet, Suite 301 CITY-ST-ZIP SAINT LOUIS, MO 63141 CITY-ST-7IP MIAMI , FC 3312) TITLE __ Change Addition TITLE ☐ Delete Hauk, John D NAME NAME 999 Executive tarkway, Suite 202 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP Saint Louis, Mo 6314 TITLE Delete TITLE ___ Change Addition | Punshon, Bette NAME NAME 999 Executive PARKWAY, Suite 202 STREET ADDRESS STREET ADDRESS Saint Kous, NO 63141 CITY-ST-ZIP

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

ND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE:

FILED

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # L52150 **ATTACHMENT** MIAMI AIR INTERNATIONAL, INC. # 14016586 Principal Place of Business Mailing Address P 0 BOX 660880 5000 NW 36THSTREET **SUITE 307** SUITE 307 MIAMI SPRINGS, FL 33266 MIAMI, FL 33122 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 04262005 Chg-P CR2E034 (10/03) City & State City & State Applied For 4. FEI Number 65-0174270 Not Applicable Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name JUAN O'NAGHTEN O'NAGHTEN, JUAN T Street Address (P.O. Box Number is Not Acceptable) 2665 S BAYSHORE DR SUITE 1100 GRAND BAY PLAZA 2950 SW 27th QUENUE-SUITE 300 MIAMI, FL 33133 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. I am familiar with, and accept the obligations of registered agent. Signature, typed or printed name of registered agant and title it applicable. (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 \$5.00 May Be \Box Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. VPO Addition ☐ Delete TITLE Change TITLE D'NACHTEN, TUAN T 2950 S.W. 27 th QUENUE, Sult 300 NAME PROIA, JAMES STREET ADDRESS 3600 WASHINGTON LA STREET ADDRESS COOPER CITY, FL CITY-ST-ZIP CITY-ST-ZIP MIAMI FL 33133 CEOP TITLE Delete TIT! F Change Addition | FISCHER, DOUGLAS R NAME NAME 7690 SW 127 STREET STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MIAMI, FL 33156 TITLE ☐ Delete TITLE Change Addition CONSER, ROBERT NAME NAME STREET ADDRESS 5000 NW 36TH ST STREET ADDRESS CITY-ST-ZIP MIAMI, FL 33266 CITY-ST-ZIP Delete Addition TITLE BM NAME MORGAN, JAMES NAME 1031 EXCUTIVE PARKWAY STREET ADDRESS STREET ADDRESS SAINT LOUIS, MO 63141 CITY-ST-ZIP CITY-ST-ZIP Delete __ Change Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete T Change TITLE TITI F ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP 12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered. 4/26/05 305-876-3600 SIGNATURE: RINTED NAME OF SIGNING OFFICER OR DIRECTOR