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

APPROVED AND FILED
95 JAN 30 AM 7:52
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # L85336 (0)

1. Corporation Name
PACIFIC AIRLINE SUPPORT CORPORATION

Principal Place of Business	Mailing Address
1100 N.W. 54TH STREET FT. LAUDERDALE FL 33315 US	1100 N.W. 54TH STREET FT. LAUDERDALE FL 33315 US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 06/29/1990
3a. Date of Last Report: 05/01/1994

2. Principal Place of Business (21): Suite, Apt. #, etc. (22); City & State (23); Zip (24); Country (25)

2a. Mailing Address (26): Suite, Apt. #, etc. (27); City & State (28); Zip (29); Country (30)

4. FEI Number: 65-0205194 ☐ 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

~~GETSON, NORMAN B~~
~~2450 HOLLYWOOD BLVD.~~
~~SUITE 501~~
~~HOLLYWOOD FL 33020~~

10. Name and Address of New Registered Agent

81 Name: C. Christian Sautter
82 Street Address (P.O. Box Number is Not Acceptable): 200 E. Las Olas Blvd
83: Suite 1900
84 City: Ft. Lauderdale FL 85 Zip Code: 33301

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: C. Christian Sautter — C. Kristian Sautter — January 23, 1995
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	~~D~~	1.1 TITLE	DIRECTOR ☐ Change ☒ Addition
NAME	~~MAGILL, ROBERT K.~~	1.2 NAME	TODD DITMARS
STREET ADDRESS	~~900 MANGO ISLE~~	1.3 STREET ADDRESS	1100 NW 54 STREET
CITY-ST-ZIP	~~FT. LAUDERDALE FL~~	1.4 CITY-ST-ZIP	FT. LAUDERDALE, FL 33309
TITLE	PD	2.1 TITLE	☐ Change ☐ Addition
NAME	CHIANG, SIMON	2.2 NAME	
STREET ADDRESS	1100 N.W. 54TH STREET	2.3 STREET ADDRESS	
CITY-ST-ZIP	FT. LAUDERDALE FL	2.4 CITY-ST-ZIP	
TITLE	D	3.1 TITLE	☐ Change ☐ Addition
NAME	MASH, CHRISTOPHER	3.2 NAME	
STREET ADDRESS	1100 N.W. 54TH STREET	3.3 STREET ADDRESS	
CITY-ST-ZIP	FT. LAUDERDALE FL	3.4 CITY-ST-ZIP	
TITLE	ST	4.1 TITLE	☐ Change ☐ Addition
NAME	GEIS, KATHRYN	4.2 NAME	
STREET ADDRESS	1100 NW 54TH STREET	4.3 STREET ADDRESS	
CITY-ST-ZIP	FT. LAUDERDALE FL	4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		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)(i), 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: ~~Kathryn A. Geis~~ Kathryn A. Geis — 1/17/95 — 305-351-9550
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0210729 CP