File on or before May 1, 1998 or Limited Liability Company will be subject to a \$ 400.00 LATE FEE.

LIMITED LIABILITY COMPANY FLORIDA DEPARTMENT OF STATE FILED Sandra B. Mortham ANNUAL REPORT Secretary of State 1998 98 MAY -8 PM 4: 09 DIVISION OF CORPORATIONS FILING FEE Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee SECRETARY OF STATE
TALLAHASSEE, FLORIDA Make Check Payable To: FLORIDA DEPARTMENT OF STATE Name and Mailing Address of Limited Liability Company **DOCUMENT #** L9700000989 1a. Principal Place of Business Address STAR AIR INTERNATIONAL, L.L.C. 3802 SOUTHERN BLVD. 3802 SOUTHERN BLVD. WEST PALM BEACH FL 33406 WEST PALM BEACH FL 33406 2. Principal Place of Business 2a. Mailing Address 3. Date Organized or Qualified | 3a. State of Formation 09/05/1997 FLSuite, Apt. #, etc. Suite, Apt. #, etc. L4. FEI Number Applied For 65-0793547 City & State City & State Not Applicable 5. Date of Last Report 6. Certificate of Status Desired Country Zip Country \$6.75 Additional Fee Required 7. Name and Address of Current Registered Agent 8. Name and Address of New Registered Agent/Office BAUMGARTEN, MAURICE J ANANIA, BANDLAYDER & BLACKWELL Street Address (P.O. Box Number is Not Acceptable) 100 SE 2ND ST., STE. 3300 ١ MIAMI FL 33131 Suite, Apt. #, etc. City Zip Code 9. Pursuant to the provisions of Sections 608.416 and 608.508, Florida Statutes, the above-named limited liability company 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 affirmative vote of a majority of the members. I hereby accept the appointment as registered agent, and accept the obligations. SIGNATURE _ (flegistered Agent Accepting Appointment) (NOTE Registered Agent signature required when reinstating) 10. Title Managing Members/Managers **Business Street Address** City, State and Zip Code MGR ELLIOTT, WILLIAM B 3802 SOUTHERN BLVD. WEST PALM BEACH FL MGRM | WEILAND, JAMES 3802 SOUTHERN BLVD. WEST PALM BEACH FL 100002525991---05/15/98--01101--018 ****188.75 ****188.75

11. Ido hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3) (i), Florida Statutes. Ifurther certify that the information indicated on this annual report is true and accurate and that my signature shall have the same legal effect as if made under eath; that I am a managing member or manager of the limited liability company or the receiver of trustee empowered to execute this report as required by Chapter 608, Florida Statutes; and that my name appears in Block 10, or on an attachment with an address.

SIGNATURE:

TURE AND TYPE IT OR PENTLO NAME OF SIGNING MANAGING MEMBER OR MANAGER

JATTES WEILAND 4

Daytime Phone #