## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000051870

Entity Name: AIR FLORIDA AIRWAYS INC.

FILED May 15, 2009 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

8981 S. HOLLYBROOK BLVD., BLDG. 35, S-107 5565 NW 15TH. AVENUE PEMBROKE PINES, FL 33025

HANGAR 65

FORT LAUDERDALE, FL 33309 US

**Current Mailing Address:** New Mailing Address:

8981 S. HOLLYBROOK BLVD., BLDG. 35, S-107 P.O. BOX 480194

PEMBROKE PINES, FL 33025 FORT LAUDERDALE, FL 33348 US

FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) Certificate of Status Desired ( )

Name and Address of New Registered Agent: Name and Address of Current Registered Agent:

TESSLER, JOEL KRASER, G. S 8981 S. HOLLYBROOK BLVD., BLDG. 35, S-107 5565 NW 15TH. AVENUE

PEMBROKE PINES, FL 33025 HANGAR 65

FORT LAUDERDALE, FL 33309 US

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: G.S. KRASER 05/15/2009

> Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSTD () Delete Title: (X) Change ( ) Addition

AIR FLORIDA AIRWAYS, INC. Name: TESSLER, JOEL Name: Address: P.O. BOX 480194

8981 S. HOLLYBROOK BLVD., BLDG. 35, S-107 Address:

City-St-Zip: PEMBROKE PINES, FL 33025 City-St-Zip: FORT LAUDERDALE, FL 33348

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: G.S. KRASER **PSTD** 05/15/2009

Electronic Signature of Signing Officer or Director

Date