

**FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00**

**FILED**

**Jan 27 1997 8:00am  
Secretary of State**

**PROFIT CORPORATION ANNUAL REPORT 1997**



FLORIDA DEPARTMENT OF STATE  
**Sandra B. Mortham**  
Secretary of State  
DIVISION OF CORPORATIONS

**DOCUMENT # P24682 (7)**  
1. Corporation Name  
**LTU INTERNATIONAL AIRWAYS, INC.**



Principal Place of Business: **100 N. BISCAYNE BLVD. #500 MIAMI FL 33132**  
Mailing Address: **100 N. BISCAYNE BLVD. #500 MIAMI FL 33132-2344**

3. Date Incorporated or Qualified: **06/12/1989**  
3a. Date of Last Report: **06/07/1996**

2. Principal Place of Business

4. FEI Number: **95-4164346**  
Applied For:  Not Applicable

21. Suite Apt. # etc.

5. Certificate of Status Desired:  **\$8.75 Additional Fee Required**

22. City & State

6. Election Campaign Financing Trust Fund Contribution:  **\$5.00 May Be Added to Fees**

23. Zip Country

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes:  Yes  No

24. Zip Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**FREYMUTH, PETER A  
100 N. BISCAYNE BLVD., #500  
MIAMI FL 33132**

81 Name  
82 Street Address (P.O. Box Number is Not Acceptable)  
83  
84 City **FL** 85 Zip Code

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: \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE: **PD**  DELETE  
NAME: **FREYMUTH, PETER A**  
STREET ADDRESS: **100 N. BISCAYNE BLVD., #500**  
CITY-ST-ZIP: **MIAMI FL**

11 TITLE: **DIRECTOR**  Change  Addition  
12 NAME: **H. D. FAERBER FAERBER, H.-D.**  
13 STREET ADDRESS: **FLUGHAFEN HALLE, 8.D 4000**  
14 CITY-ST-ZIP: **DUSSELDORF, GERMANY**

TITLE: **VP**  DELETE  
NAME: **JAMES, JACQUELINE S.**  
STREET ADDRESS: **100 N. BISCAYNE BLVD., SUITE 500**  
CITY-ST-ZIP: **MIAMI FL**

21 TITLE:  Change  Addition  
22 NAME:  
23 STREET ADDRESS:  
24 CITY-ST-ZIP:

TITLE: **D**  DELETE  
NAME: **DRIESSEN, H J**  
STREET ADDRESS: **FLUGHAFEN, HALLE 8.D 4000**  
CITY-ST-ZIP: **DUESSELDORF-GERMANY**

31 TITLE: **DIRECTOR**  Change  Addition  
32 NAME: **WESTEN, HEINZ**  
33 STREET ADDRESS: **FLUGHAFEN, HALLE 8.D 4000**  
34 CITY-ST-ZIP: **DUESSELDORF, GERMANY**

TITLE: **D**  DELETE  
NAME: **WREDE, THOMAS**  
STREET ADDRESS: **FLUGHAFEN, HALLE 8.D 4000**  
CITY-ST-ZIP: **DUESSELDORF-GERMANY**

41 TITLE:  Change  Addition  
42 NAME:  
43 STREET ADDRESS:  
44 CITY-ST-ZIP:

TITLE: **TS**  DELETE  
NAME: **VENHAUS, BRUCE E.**  
STREET ADDRESS: **100 N. BISCAYNE BLVD., SUITE 500**  
CITY-ST-ZIP: **MIAMI FL**

51 TITLE:  Change  Addition  
52 NAME:  
53 STREET ADDRESS:  
54 CITY-ST-ZIP:

TITLE: **VP**  DELETE  
NAME: **WEBER, BRADLEY J.**  
STREET ADDRESS: **100 N. BISCAYNE BLVD., SUITE 500**  
CITY-ST-ZIP: **MIAMI FL**

61 TITLE:  Change  Addition  
62 NAME:  
63 STREET ADDRESS:  
64 CITY-ST-ZIP:

14. I do 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 included 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:** \_\_\_\_\_  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (9/96)