FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT

1996

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

DOCUMENT # **P93000020133 (3)**

1. Corporation Name

JETSTREAM AIRCRAFT SALES, INC.

Principal Place of Business	Mailing Address
~~6555 NW 36TH ST~~ ~~200 A~~ ~~MIAMI FL 33166~~ US	~~6555 NW 36TH ST~~ ~~200 A~~ ~~MIAMI FL 33166~~ US

2. Principal Place of Business	2a. Mailing Address
21 1900 Glades Road	26 7855 N.W. 29th St
Suite, Apt. #, etc. 22 353	Suite, Apt. #, etc. 27 158
City & State 23 Boca Raton - FL	City & State 28 Miami , Fl
Zip 24 33431	Country 25 US
Zip 29 33122	Country 30 US

3. Date Incorporated or Qualified: 03/17/1993
3a. Date of Last Report: 04/25/1995
4. FEI Number: 65-0389331 ☐ 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

RIVAS, JOSE F
~~6501 NORTHWEST 36TH STREET~~
~~SUITE 112~~
~~MIAMI FL 33166~~

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable): 7855 N.W. 29th street
83 UNIT 158
84 City: MIAMI FL 85 Zip Code: 33122

11. Pursuant to the provisions of Sections 607.0505, 607.1507, 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: JOSE FELIX RIVAS 02/12/96
(Signature of New Registered Agent, if changing) (Printed Name of New Registered Agent) (Date)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1 TITLE	VD ☐ DELETE	1 TITLE	☑ Change ☐ Addition
1 NAME	RIVAS, JOSE F	1 NAME	
1 STREET ADDRESS	~~6501 NORTHWEST 36TH ST 3-112~~	1 STREET ADDRESS	7855 N.W. 29th street, UNIT 158
1 CITY-ST-ZIP	~~MIAMI FL~~	1 CITY-ST-ZIP	MIAMI, FL 33122
2 TITLE	PD ☐ DELETE	2 TITLE	☐ Change ☐ Addition
2 NAME	MCADAM, TOM	2 NAME	
2 STREET ADDRESS	3149 MILLWOOD TERRACE, APT. M219	2 STREET ADDRESS	
2 CITY-ST-ZIP	BOCA RATON FL	2 CITY-ST-ZIP	
3 TITLE	☐ DELETE	3 TITLE	☐ Change ☐ Addition
3 NAME		3 NAME	
3 STREET ADDRESS		3 STREET ADDRESS	
3 CITY-ST-ZIP		3 CITY-ST-ZIP	
4 TITLE	☐ DELETE	4 TITLE	☐ Change ☐ Addition
4 NAME		4 NAME	
4 STREET ADDRESS		4 STREET ADDRESS	
4 CITY-ST-ZIP		4 CITY-ST-ZIP	
5 TITLE	☐ DELETE	5 TITLE	☐ Change ☐ Addition
5 NAME		5 NAME	
5 STREET ADDRESS		5 STREET ADDRESS	
5 CITY-ST-ZIP		5 CITY-ST-ZIP	
6 TITLE	☐ DELETE	6 TITLE	☐ Change ☐ Addition
6 NAME		6 NAME	
6 STREET ADDRESS		6 STREET ADDRESS	
6 CITY-ST-ZIP		6 CITY-ST-ZIP	

CR2E034 (12/95)

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: JOSE FELIX RIVAS 02/12/96 (305) 871-1600
(Signature of Officer or Director) (Printed Name of Signing Officer or Director) (Date) (Area Code & Daytime Phone Number)