Zp         Country         Zp         Country         S. Cendicator Status Desired         \$8.75         Additional Response           • Name and Address of Current Registered Agent         7. Name and Address of New Registered Agent         7. Name and Address of New Registered Agent           • MOLINET, WILLIAM 915 CORDOVA RD FT LAUDERDALE PL 33316         Name         Stoot Address (P.D. Box Number is Not Acceptable)         FL         Zp Code           • Otiv         FL         Zp Code         City         FL         Zp Code           • Otiv         FL         Stoot Address (P.D. Box Number is Not Acceptable)         Otit         City         FL         Zp Code           • Otiv         FL         City         FL         Zp Code         City         FL         Zp Code           • The above named entry submits statement for the purpose of changing its registered office or registered agent, or both, in the State of Fondos.         Otit         FL         Name Entry Name E	2001 UNIFORM BUSINESS REPORT (UBR) DOCUMENT # P93000062408 1. Entity Name FALCON CHARTERS INC.						FILED Jan 23, 2001 8:00 am Secretary of State 01-23-2001 90108 025 ***150.00			
Sinter, Apt, #. otc.         Suito, Apt, #. etc.         DD NOT WHITE IN THIS SPACE           City & State         City & State         4. FEI Number 65 0436880         Applied For.           Zip         Country         Zip         Country         S. Count cate of Status Desired         \$8.7.5 Auditional Fee Address of Country           State Address of Country         Zip         Country         S. Count cate of Status Desired         \$8.7.5 Auditional Fee Address of New Registered Agent         Name           MOLINET, WILLIAM SIS CORDOVA RD In audition of the Address of Country to Desire The puppeer of changing to registered of ce or registered agent         Name         FLE         Zip	1126 S FED HV SUITE 175 FT LAUDERDAL	ŴY	1126 S FED HWY SUITE 175 FT LAUDERDALE FL 33316						<b>20</b> .01 1011 1031	
City & State       City & State       4. FEI Number       GS-0436680       Applied For         Zip       Country       Zip       Country       S. Carrificate of Status Derive II       SS:75.4dditional Net Applicate         S. Name and Address of Current Registered Apent       7. Name and Address of New Registered Apent       7. Name and Address of New Registered Apent         MOLINET, WILLIAM 915 CORDOVA RD FT LAUDERDALE FL 33316       Street Address (P.O. Box Number is Not Acceptable)       FL         Or       Street Address (P.O. Box Number is Not Acceptable)       FL       Zip Code         1. The above numed ently submits its statement for the purpose of changing its registered office or togitolered agent, or both, in the State of Florids.       Sinter Address of New Registered Apent         SIGNATURE       Tax fing regularizemant and exits its Intaraption       Application agent, or both, in the State of Florids.         SIGNATURE       Tax fing regularizemant and exits its Intaraption       S5.00 Make Check Payable to Department of State       10. Election Campaign Financing       S5.00 Make Check Payable to Department of State         1. Different Andres       OIFICERS AND DIFECTORS       11       11.       11.       11.         1. Different Andres       OIFICERS AND DIFECTORS       12.       ADDIFIONES/CHANGES TO OFFICERS AND DIFECTORS N 11.         1. The second Andres       OIFICERS AND DIFECTORS       11.       11.<			-							
Zip         Country         Zip         Country         St. Carriestica of Status Berline (Status Berline)         St. 75 Additional St. Status Berline)           6. Hame and Address of Current Registered Apent         7. Name and Address of New Registered Apent         7. Name and Address of New Registered Apent           MOLNET, WILLIAM 915 CORDOVA RD FT LAUDERDALE FL 33316         Steep Address (P.O. Box Number is Net Acceptable)         FL           Or         FL         Steep Address (P.O. Box Number is Net Acceptable)         FL           Or         FL         Zip Code         Steep Address (P.O. Box Number is Net Acceptable)           Steep Address (P.O. Box Number is Net Acceptable)         FL         Zip Code           Steep Address (P.O. Box Number is Net Acceptable)         FL         Zip Code           Steep Address (P.O. Box Number is Net Acceptable)         FL         Zip Code           Steep Address (P.O. Box Number is Net Acceptable)         FL         Zip Code           Steep Address (P.O. Box Number is Net Acceptable)         FL         Zip Code           Steep Address (P.O. Box Number is Net Acceptable)         FL         Zip Code           Steep Address (P.O. Box Number is Net Acceptable)         FL         Zip Code           Not More correstion is eligible to astick to finance to acceptable is Net Acceptable to acceptable to accept the Addres Floate to acceptable is Net Acceptable to acceptable to acceptab	City & Sta	te	City & State							
						00 0400000	 ┐ <b>\$8.75</b> ѧ	Not Applicable		
MOLINET, WILLIAM 915 CORDOVA RD FT LAUDERDALE FL 33316       Street Address (P.O. Box Number is Not Acceptable)         City       FL       Zip Code         City       FL       Zip Code         City       FL       Zip Code         Street Address (P.O. Box Number is Not Acceptable)       FL       Zip Code         City       FL       Zip Code         Street Address (P.O. Box Number is Not Acceptable)       FL       Zip Code         Street Address (P.O. Box Number is Not Acceptable)       FL       City       FL         Street Address (P.O. Box Number is Not Acceptable)       FL       City       FL         Street Address (P.O. Box Number is Not Acceptable)       Date       City       FL         Street Address (P.O. Box Number is Not Acceptable)       Date       City       FL         Street Address (P.O. Box Number is Not Acceptable)       Date       City       FL         Street Address (P.O. Box Number is Not Acceptable)       Date       Date       Date       Date         Mol Net Address (P.O. Box Number is Not Acceptable)       FL       Date       D		6. Name and Address of Current	t Registered Agent	l				<ul> <li>Fee Requi</li> </ul>	red	
Change   Change   Change   Change   Change   Change   Change   Change   Addito   Change	915 CORDOVA RD					as (P.O. I	Box Number is Not Acceptable)			
					City			<b>FI</b> Zip Co	ode	
SIGNATURE	8. The above	named entity submits this statement for	or the purpose of changing its	registere	d office or regis	stered ag	jent, or both, in the State of Florida.	• •		
Task filing requirement and elects to do so. (See criteria on back)       After MAY 1, 2001 Fee will be \$550.00 Make Check Payable to Department of State       Inst Fund Contribution.       Added to Fees         11.       OFFICERS AND DIRECTORS       12.       ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11         Thr.E       D       Intre       Addition       Intre       Addition         ITTLE       D       Intre       Mole       Street Address       Intre       Addition         ITTLE       D       Intre       Mole       Street Address       Intre       Addition         ITTLE       Name       Intre       Mole       Street Address       Intre       Addition         ITTLE       Intre       Intre       Intre       Mole       Intre       Intre         Intre       Intre       Intre       Mole       Street Address       Intre       Intre         Intre	SIGNATURE		t and title if applicable, (NOTE	E: Registered	d Agent signature requ	uired when re	einstating)	DATE		
TITLE       D       Delete       TITLE       NAME         STRET ADDRESS       Change       Delete       TITLE         ITLE       MOLINET, WILLIAM       Delete       TITLE         STRET ADDRESS       CITY-ST-2P       CITY-ST-2P         ITLE       Delete       TITLE         NAME       STRET ADDRESS       CITY-ST-2P         CITY-ST-2P       Delete       TITLE         NAME       STRET ADDRESS       CITY-ST-2P         TITLE	Tax filing i	requirement and elects to do so.	After MAY 1, 20	01 Fee	will be \$550.0			· · · ·	<b>.00</b> May Be ed to Fees	
NAME     MOLINET, WILLIAM     Industry     Industry       STREET ADDRESS     1128 S FED HWY SUITE 175     STREET ADDRESS       IT/LE     IT/LE     IT/LE       NAME     IDelete     IT/LE       NAME     STREET ADDRESS     IT/LE       STREET ADDRESS     IT/LE     IDelete       IT/LE     IDelete     IT/LE       NAME     STREET ADDRESS     IT/LE       STREET ADDRESS     IT/LE     IDelete       IT/LE     IDelete     IT/LE       NAME     STREET ADDRESS     IT/LE       IT/LE     IDelete		· · · · · · · · · · · · · · · · · · ·				AD	DITIONS/CHANGES TO OFFICER	·		
NAME     NAME       STRET ADDRESS     STRET ADDRESS       CITY-ST-ZP     ITLE       NAME     ITLE       NAME     STRET ADDRESS       CITY-ST-ZP     ITLE       NAME     STRET ADDRESS       CITY-ST-ZP     CITY-ST-ZP       ITLE     Delete       ITLE     Otherses       CITY-ST-ZP     CITY-ST-ZP       ITLE     Delete       ITLE     CITY-ST-ZP       ITLE     Delete       ITLE     CITY-ST-ZP       ITLE     Delete       ITLE     Delete       ITLE     CITY-ST-ZP       ITLE     Delete	NAME Street address	1126 S FED HWY SUITE 175		NAME	e Et address					
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NAME       Image: Control of the corporation or the receiver or trustee empowered to execute this report to supplemental 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 or supplemental 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 or supplemental 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 or supplemental reports 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 or supplemental reports 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 or supplemental reports in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like emperatored.	NAME STREET ADDRESS		Delete	NAME	et address			Change	Addition	
NAME       NAME         STREET ADDRESS       STREET ADDRESS         CITY-ST-ZIP       CITY-ST-ZIP         13. I 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 indicated on this report or supplemental 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 by required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered	. NAME Street address		Delete	NAME STREE	et address			Change	Addition	
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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered to the empowered to the empowered to the empowered by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered to the empowered to the empowered to the empowered to the empower effect as the empo	NAME STREET ADDRESS	· · · · ·	Delete	NAME	T ADDRESS			[] Change	Addition	
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SIGNATURE:	SIGNAT	URE:	RINTED NAME OF SIGNING OFFICER C		DR			Charles	· ····	