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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # P97000035205 (8)

SERVICIOS AEREOS INTERNACIONALES USA. INC.

Principal Place of Business Mailing Address SAN MARTIN 981. FLOOR 4. SUITE 38 SAN MARTIN 981, FLOOR 4, SUITE 38 **BUENOS AIRES OP 1004 BUENOS AIRES CP 1004**

FILED May 08 1998 8:00am Secretary of State



DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 04/21/1997 2. Principal Place of Business 2a. Mailing Address FEI Number Applied For Not Applicable 21 26 Sulte, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution 23 28 Added to Fees Zip Country Zip Country 8. This corporation owes or has paid the current year intangible 24 ☐ No 29 30 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 CORPORATE CREATIONS ENTERPRISES, INC. 4521 PGA BLVD., #211 82 Street Address (P.O. Box Number is Not Acceptable) PALM BEACH GARDENS FL 33418 83 City Zip Code 85 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 Signature, typed or printed name of registered agent and title diapplicable (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 CR2E034 (10/97 12. 13. DELETE Change Addition TITLE 11 TILLE FEDERIK DE MARTINEZ, LEONOR NAME 1.2 NAME SAN MARTIN 981, FLOOR 4, SUITE 38 STREET ADDRESS 1.3 STREET ADDRESS **BUENOS AIRES CP 1004** CITY-ST-ZIP 1.4 CITY - ST - ZIP Change DELETE ■ Addition TITLE 2.1 TITLE MARTINEZ, ADOLFO E 2.2 NAME SAN MARTIN 981, FLOOR 4, SUITE 38 STREET ADDRESS 2.3 STREET ADDRESS **BUENOS AIRES CP 1004** CITY-ST-ZIP 2 4 City - ST - ZiP ■ DELETÉ Change Addition 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS 3.4. CITY - \$1 - ZIP CITY-ST-ZIP DELETE Addition Change TITLE 4.1 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP ☐ Change DELETE Addition TITLE 6.1 TITLE 600002517636 -05/08/98--01092--034 NAME 6.2 NAME **63 STREET ADDRESS** STREET ADDRESS ***150.00 CITY-ST-ZIP 6.4 City-St-ZIP

14. 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 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 changes, or on at all achiment with an address.

90 02.00