DOCUMENT # P97000051166

FILED
Jan 13, 2001 8:00 am
Secretary of State
01-13-2001 90066 048 ***158.75

1. Entity Name
ULTRA AVIATION SERVICES, INC.

Principal Place of Business	Mailing Address
2700 NW 112 AVE. MIAMI FL 33172	2700 NW 112 AVE. MIAMI FL 33172

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
9380 SW 62 ST	MIAMI INT'L AIRPORT
Suite, Apt. #, etc.	Suite, Apt. #, etc. P.O. BOX 996548
City & State: MIAMI, FL	City & State: MIAMI, FL.
Zip: 33173 Country: USA	Zip: 33299-6548 Country: USA MIAMI-DADE

4. FEI Number 65-0764203 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent

~~DUKE~~, RAUL R
2700 NW 112 AVE
MIAMI FL 33172

7. Name and Address of New Registered Agent

Name: DUBE, RAUL R.
Street Address (P.O. Box Number is Not Acceptable): 9380 SW 62 ST.
City: MIAMI **FL** Zip Code: 33173

8. 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: Raul R Dube
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW!!! FEE IS $150.00
After MAY 1, 2001 Fee will be $550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS			12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD COQUILLOT, JACQUES E 4331 W. OAKLAND PARK BLVD. LAUDERDALE LAKES FL 33311	☐ Delete	DV	☒ Change	☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VSD YEDO, MARIO S 12034 SW 103RD ST. MIAMI FL 33186	☐ Delete	DPT	☒ Change	☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD DUBE, RAUL R 9380 SW 62ND ST. MIAMI FL 33173	☐ Delete	DSV	☒ Change	☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change	☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change	☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change	☐ Addition

CR2E034 (10/00)

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 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.

SIGNATURE: Raul R Dube RAUL R. DUBE 1/08/01 (786) 265-9120
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #