

P970000 57075

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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TO: Amendment Section
Division of Corporations

SUBJECT: HAITI AIR MANAGEMENT, INC
(Name of Corporation)

DOCUMENT NUMBER: 7970000057075

The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Nikole Augsten

(Name of Person)

Ultra Aviation Services

(Name of Firm/Company)

PO Box 996548

(Address)

Miami, FL 33299

(City/State and Zip Code)

For further information concerning this matter, please call:

Nikole Augsten

(Name of Person)

at (305) 876-0091

(Area Code & Daytime Telephone Number)

Enclosed is a check for \$35.00 made payable to the Florida Department of State.

Street Address:

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Mailing Address:

Amendment Section
Division of Corporations
Post Office Box 6327
Tallahassee, FL 32314

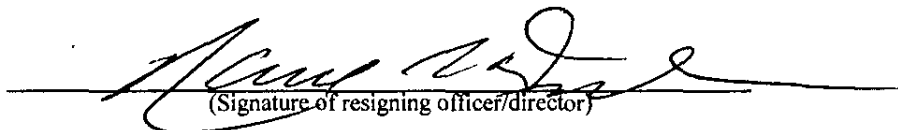
**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, Raul R. Dube, hereby resign as PSTD
(Title)

of HAITI AIR MANAGEMENT, INC
(Name of Corporation)

P97000057075, a corporation organized under the laws of the State of
(Document Number, if known)

FLORIDA


(Signature of resigning officer/director)

FILING FEE IS \$35.00

Make checks payable to Florida Department of State and mail to:

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

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TALLAHASSEE, FLORIDA

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AND
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