## 2002 UNIFORM BUSINESS REPORT (UBR)

| DOCUMENT # P9800003859  1. Entity Name  JAKS AIRLINE & AIRCRAFT SERVICES, INC.   |                                      |   |  |                      |              |  | Apr 09, 2002 8:00 am<br>Secretary of State<br>04-09-2002 90723 026 ***150.00 |                                       |                 |                             |                            |                |
|--|--------------------------------------|---|--|----------------------|--------------|--|--|---------------------------------------|-----------------|-----------------------------|----------------------------|----------------|
| Principal Place of Business 8390 W FLAGLER ST #211 MIAMI FL 33144  |                                      |   | Mailing Address 8390 W FLAGLER ST #211 MIAMI FL 33144  |                      |              |  |  |                                       |                 |                             |                            |                |
| 2. Principal Pl. 573   |                                      | 37 Street   | 3. Mailing Address<br>5731 NW 37 Street<br>Parthause 504   |                      |              | reet   |  |                                       |                 |                             |                            |                |
| Virginia La  |                                      | Lardens I   | City & State   |                      | rdero        | 11.  | 65-0805336   |                                       |                 | <del></del>                 | plied For<br>t Applicable  | ]              |
| Zip 0<br>3316  |                                      | Country USA- nd Address of Current F  | Zip<br>33166   | Coun                 | USA          | <u>_                                    </u> | 5Certificate of 7. Name and A  |                                       | Fee             | .75 Addi<br>Required        |                            |                |
| SCIARRO<br>8390 W F<br>SUITE 21<br>MIAMI FL  |                                      | Street Address (P.Q. Box Number is Not Acquentable)  Street Address (P.Q. Box Number is Not Acquentable)  Fattruse 504  Citylinginia Dordens FL Zip Code 3316 |  |                      |              |  |  | 66                                    |                 |                             |                            |                |
| SIGNATURE _  |                                      | submits this statement for June 1997  | the purpose of changing its ditte if applicable. (NOT  | h                    |              |  | d agent, or both,  | in the State of Flo                   |                 | 200                         |                            |                |
| 9. This corporation is eligible to satisfy its Intangible  Tax filing requirement and elects to do so.  (See criteria on back)  FILE NOW!!!  After May 1, 2002  Make Check Payable |                                      |   |  |                      | will be \$5  | 50.00  | Trust  | on Campaign Fin<br>Fund Contributio   |                 |                             | May Be<br>to Fees          |                |
| 11. TITLE NAME STREET ADDRESS CITY-ST-ZIP  |                                      | OFFICERS AND D<br>TA, JOSEPH<br>AGLER ST SUITE 211<br>13144   | DIRECTORS  Delete  | 111                  |              | Fax.   | ADDITIONS/CH<br>731 71<br>thouse   | W 37                                  |                 | RECTORS<br>Change           | Addition                   | CR2E034 (9/01) |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP  |                                      |   | ☐ Delete   |                      |              |  |  | ,                                     |                 | Change<br>3                 | Addition 3/66              | 5              |
| TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP   | Total William States                 |   | ☐ Delete   | - II                 |              | مهيدسي الحياد                                |  |                                       |                 | Change                      | Addition                   |                |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP   |                                      |   | ☐ Delete   | - 11                 |              |  |  |                                       |                 | ] Change                    | ☐ Addition                 |                |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP  | -                                    |   | ☐ Delete   | III .                |              |  |  |                                       |                 | ) Change                    | ☐ Addition                 |                |
| TITE E<br>NAME:<br>STREET ADDRESS<br>CITY-ST-ZIP   |                                      |   | ☐ Delete   | ll l                 |              |  |  |                                       |                 | Change                      | ☐ Addition                 |                |
| indicated of the corp  | on this report or<br>poration or the | or supplemental report is<br>receiver or trustee empor  | this filing does not qualify for<br>true and accurate and that r<br>wered to execute this report<br>ith all other like empowered | ny signa<br>as requi | ture shall h | ave the sa<br>opter 607,                     | ame legal effect a<br>Florida Ștatutes;<br>'                                 | s if made under o<br>and that my name | e appears in Bl | an officer of<br>lock 11 or | or director<br>Block 12 if |                |
| SIGNAT   | URE:                                 | Spring  | Xdianol  | (1)                  | 14           | 8 ferc                                       | siden  | + IMO                                 | reh 28          | 200                         | 2                          |                |