2001 UNIFORM BUSINESS REPORT (UBR)

of the corporation or the receiver or changed, or on an attachment with

D TYPED OR PRINTED

SIGNATURE:

FILED May 01, 2001 8:00 am Secretary of State DOCUMENT # **P98000023463** 1. Entity Name FLEXJET, INC. 05-01-2001 90100 011 ***150.00 Principal Place of Business Mailing Address 1400 N.W. 107TH AVENUE 1400 N.W. 107TH AVENUE MIAMI FL 33172 MIAMI FL 33172 * O E D D D J J 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 65-0820477 Not Applicable Zip Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name LEVY, JOEL Street Address (P.O. Box Number is Not Acceptable) 1400 N.W. 107TH AVENUE **MIAMI FL 33172** City Zip Code 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 (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable. FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 12. DPCE ☐ Delete TITLE Change ☐ Addition TITLE ADLER, MICHAEL M NAME NAME STREET ADDRESS STREET ADDRESS 1400 N.W. 107TH AVENUE CITY-ST-ZIP CITY-ST-ZIP MIAMI FL 33172 ☐ Change ☐ Addition DEAS TITLE ☐ Delete TITLE LEVY, JOEL NAME NAME STREET ADDRESS STREET ADDRESS 1400 N.W. 107TH AVENUE CITY-ST-ZIP CITY-ST-ZIP MIAMI FL 33172 ☐ Change ☐ Addition ☐ Delete TITLE ARRIZURIETA, LUIS NAME NAME STREET ADDRESS 1400 N.W. 107TH AVENUE STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MIAMI FL 33172 ☐ Addition Change ☐ Delete TITLE TITLE ADLER, LINDA NAME NAME 1400 N.W. 107TH AVENUE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MIAMI FL 33172 Change ☐ Addition TITLE ☐ Defete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP 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 as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if

Joel Levy

E OF SIGNING OFFICER OR DIRECTOR

Executive Vice President