FILED

Aug 10, 1999 8:00 am Secretary of State

08-10-1999 90016 041 ***550.00

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999. AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P98000039895

JACARANDA AIR MIAMI, INC.

an officer or director of the corpor in Block 12 or Block 13 if change

SIGNATURE

-: 												
Principal Place	e of Business		Maii	ling Address		_		1 (80)(88) (10 (8)(8) (8))(8		())40 /0(0	i likitin chinc Acti skat	
6600 NORTHWEST 27TH AVENUE			6600	6600 NORTHWEST 27TH AVENUE								
SUITE WI01B			SUITE W101B					İ				
MIAMI FL 33147			MIAMI FL 33147						DO NOT WRITE IN THIS SPACE			
								3. Date Incorporated or Qua 05/04/1998	lified			
2. Principal Place of Business			2a.	2a. Mailing Address				4. FEI Number		<u> </u>	Applied For	
21			26			65-07625	66		Not Applicable			
Suite, Apt. #, etc.			Suite, Apt. #, etc.					5. Certificate of Status Desir	5. Certificate of Status Desired \$8.75 Additional Fee Required			
City & State			28	City & State			Election Campaign Finan Trust Fund Contribution	6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees				
Zip	_	Country	1	Zip		Country	,	8. This corporation owes the	current year _	_		
24		25	29		30	1		Intangible Personal Prope	erty.	Yes	No No	
	9. Name	and Address of Current	Registe	ered Agent				10. Name and Address of N	lew Registered	Agent		
						81	Name					
	RILAWYER					82	Stroot A	ddress (P.O. Box Number is Not Ac	centable)			
343 ALMERIA AVENUE							0					
COR	IAL GABLES	6 FL 33134				83						
						84	City		FL	85	Zip Code	
		4 007.0E03		7 1EOR Clorida	a Ctatuton f	ho abovo	named co	rporation submits this statement for		anging	its registered	
44 0	t to the provisi		and but	7. IOUG. FIUITUR	a otatutes, t	lie annie	rianieu w	ration's board of directors. I hereby	accept the appoi	ntment	as registered	
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office or	registered ag am familiar w	ent, or both, in the State c	of Florida tions of,	a. Such chang section 607.0	ge was auth 0505, Florida	a Statute	y the corpor	required when reinstating)	DATE			
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