2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# S08904

Entity Name: EXECUTIVE AIR SERVICES, INC.

FILED Feb 20, 2002 8:00 AM Secretary of State

Current Principal Place of Business: New Principal Place of Business:

Current Mailing Address: New Mailing Address:

1825 PONCE DE LEON BLVD STE 487 15001 NW 42ND AVE CORAL GABLES, FL 33134 MIAMI, FL 33054

FEI Number: 65-0283540 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

HORN, ANDREW W
1 SE THIRD AVE
MIAMI, FL 33131 US

MITCHELL E. JACOBS, P.A.
15001 NW 42ND AVE
MIAMI, FL 33131 US

MIAMI, FL 33131 US

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: MITCHELL E. JACOBS 02/20/2002

Electronic Signature of Registered Agent Date

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X). Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSTD () Delete Title: (X) Change () Addition VASQUEZ, FABIO A P/T/S Name: QUEVEDO, MARTHA Name: 1825 PONCE DE LEON BLVD 487 Address: 15001 NW 42ND AVE Address: City-St-Zip: CORAL GABLES, FL 33134 City-St-Zip: MIAMI, FL 33054

Title: () Delete Title: VP () Change (X) Addition

 Name:
 Name:
 LARES, ADALBERTO VP

 Address:
 Address:
 15001 NW 42ND AVE

 City-St-Zip:
 City-St-Zip:
 MIAMI, FL 33054

Title: () Delete Title: CFO () Change (X) Addition

 Name:
 Name:
 GOMEZ, HUGO L CFO

 Address:
 Address:
 15001 NW 42ND AVE

 City-St-Zip:
 City-St-Zip:
 MIAMI, FL 33054

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: FABIO ALEXANDER VASQUEZ PTS 02/20/2002