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For DOT Use Only - PC No. 06-030 Waiver No. _____



U.S. Department of Transportation
Office of the Secretary of Transportation

STATEMENT OF CHARTER OPERATOR AND DIRECT AIR CARRIER
FLIGHT SCHEDULE NUMBER M1394.05.11

INSTRUCTIONS: Submit this form in duplicate to U.S. Department of Transportation, Special Authorities Division, X-57, Office of Aviation Analysis, 400 7th Street, SW, Washington, DC 20590. Date of filing for purposes of DOT regulations is the date properly completed forms are received by DOT.

1a. Name (and DBA, if applicable) and Mailing Address of Charter Operator

The Olivia Companies, LLC
434 BRANNAN Street
San Francisco, CA 94608

This filing has been assigned number
PC 06-030 and will be reviewed by

William E. Humming

Any future correspondence concerning this filing should be addressed to this person and should refer to the PC number.

1b. Telephone Number () 415.962.5644
Fax Number () 415.962.5715

This filing was received by DOT on

2/6/06. Unless the charterer is otherwise notified, advertising of the program may begin on 2/7/06.

2a. Name (and DBA, if applicable) and Mailing Address of Direct Air Carrier

Miami Air International Inc
PO Box 660880
Miami, FL 33266
C. Wellington
CLEARCRO
2/7/06

Special Authorities Division, X-57
Office of Aviation Analysis
Department of Transportation
Accepted by Waiver No.

2b. Telephone Number () 305.876.3600
Fax Number () 305.871.4222

3. Proposed date and routing of each flight: (use additional pages, if necessary)

4/29/2006, 5/06/2006 Ft. Lauderdale, FL to Columbus Isle, San Salvador
2 round trip rotations

4. Type of aircraft and number of seats engaged:

737-800 @ 172 pax per rotation

5. Charter price of each flight:*

\$ 335.63

6. Tour itinerary (if any) including hotels (names and length of stay at each), and other accommodations and services:

7 night stay @ Columbus Isle Club Med 4/29-5/6/06

*If confidentiality is desired, please state charter price in separate correspondence.

OST Form 4532

We, Olivia Companies, LLC (Charter Operator)
and Miami Air International, Inc (Direct Air Carrier)

certify that we have entered into a charter contract on 7/12/05 (Date) that covers the flight schedule described above. The contract complies with all applicable DOT regulations.

7. A copy of the flight schedule has been sent to (complete applicable blanks and write "N.A." in those not applicable):

City National Bank (Charter Operator's Securer)
City National Bank (Charter Operator's Depository Bank)
N/A (Direct Carrier's Securer)
N/A (Direct Carrier's Depository Bank)

8. Applicant is a U.S. Public Charter Operator as defined in Section 380.2 of the Department's regulations:

Dianne Dubois (Signature of Officer) Dianne Dubois (Name in print) CFO (Title)

9. CHARTER OPERATOR
BY: Dianne Dubois (Signature)
Dianne Dubois (Name in print)
CFO (Title)
415.962.5644 (Phone Number), 415.962.5715 (Fax Number)
434 BRANNAN ST (Street, Box Number)
SAN FRANCISCO, CA 94107 (City, State, Zip Code)
1/30/06 (Date)**

DIRECT AIR CARRIER
BY: Cecilia (Signature)
MICHAEL HACKETT (Name in print)
VA SALES (Title)
305.776.3600 (Phone Number), 305.777.4222 (Fax Number)
P.O. Box 66880 (Street, Box Number)
Miami FL 33323 (City, State, Zip Code)
7/12/06 (Date)**

**This document is not acceptable if not dated.

Schedule B

Flight Schedule

Contract No: M1394.05.11

Contract Date: 06/17/2005

Revision No:

Date	Flt #	Dep	Time LCL	Operation	Arr	Time LCL	Operation	Flight Time	Stop	Meal Service	Bar Service	Amenities
04/29/2006	629	FLL	0630 L	Terminal	ZSA	0945 L	Terminal	1:15	No	Standard Beverage	Cash Bar	Headrest Covers
05/06/2006	630	ZSA	0900 L	Terminal	FLL	1020 L	Terminal	1:20	No	Standard Beverage	Cash Bar	Headrest Covers
04/29/2006	631	FLL	1400 L	Terminal	ZSA	1515 L	Terminal	1:15	No	Standard Beverage	Cash Bar	Headrest Covers
05/06/2006	632	ZSA	1430 L	Terminal	FLL	1550 L	Terminal	1:20	No	Standard Beverage	Cash Bar	Headrest Covers

84-0117-0-03390

Accepted by: The Olivia Companies, LLC.

Initials: _____ Date: _____

Accepted by: Miami Air International, Inc.

Initials: _____ Date: _____