FILED

## 2002 UNIFORM BUSINESS REPORT (UBR)

## Feb 11, 2002 8:00 am **DOCUMENT #** F01000000475 **Secretary of State** 1. Entity Name JET'S AMERICA, INC. 02-11-2002 90111 006 \*\*\*150 00 Principal Place of Business Mailing Address 37177 MOUND ROAD 37177 MOUND ROAD STERLING HEIGHTS MI 48310 STERLING HEIGHTS MI 48310 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 38-3021383 Not Applicable Zip 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 C T CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324 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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 9. This corporation is eligible to satisfy its Intangible --- cFILE:NOW!!!| FEE:IS \$150:00= 10. Election Campaign Financing **\$5.00** May Be Tax filing requirement and elects to do so. After May 1, 2002 Fee will be \$550.00 Trust Fund Contribution. (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE TITLE □ Delete Change ☐ Addition NAME NAME JETTS, EUGENE JR. STREET ADDRESS STREET ADDRESS 37177 MOUND ROAD CITY-ST-ZIP CITY-ST-ZIP STERLING HEIGHTS MI 48310 ☐ Delete TITLE .... TITLE Change ☐ Addition VD NAME NAME JETTS, JOHN STREET ADDRESS STREET ADDRESS 37177 MOUND ROAD CITY-ST-ZIP CITY-ST-ZIP STERLING HEIGHTS MI 48310 Delete TITLE TITLE Change ☐ Addition NAME NAME GALLOWAY, JAMES STREET ADDRESS STREET ADDRESS 37177 MOUND ROAD CITY-ST-ZIP CITY-ST-ZIP STERLING HEIGHTS MI 48310 TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME JETTS, JOHN STREET ADDRESS STREET ADDRESS 37177 MOUND ROAD CITY-ST-ZIP CITY-ST-ZIP STERLING HEIGHTS MI 48310 ☐ Delete TITLE ☐ Change ☐ Addition NAME GALLOWAY, JEFFREY J STREET ADDRESS STREET ADDRESS 37177 MOUND ROAD CITY ST-ZIP\_\_\_ STERLING HEIGHTS MI 48310 CITY-ST-ZIP" TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND PECOR PRINTED MAME OF SIGNING OFFICER OR DIRECTO

1-14-02

Daytime Phone #

CR2E034 (9/01)