2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # J25509

1. Entity Name

JET ÁVION CORPORATION



Principal Place of Business

% THOMAS S. IRWIN 3000 TAFT ST

HOLLYWOOD, FL 33021

Mailing Address

% THOMAS S. IRWIN 3000 TAFT ST HOLLYWOOD, FL 33021

FILED Apr 25, 2008 08:00 AN Secretary of State



DO NOT WRITE IN THIS SPAC

03262008 No Chg-P CR2E034 (11/05)

4.	FEI Number	 		Applied For
	59-2699611			Not Applicable
5.	Certificate of Status Desired	\$8.7	75 .	Additional

Fee Required

6. Name and Address of Current Registered Agent

MENDELSON, VICTOR H. 3000 TAFT ST HOLLYWOOD, FL 33021

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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. I am familiar with and accept SIGNATURE_ Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 9. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS TITLE AS VETTER, JUDITH W NAME STREET ADDRESS 3000 TAFT ST. CITY-ST-ZIP HOLLYWOOD, FL 33021 TITLE LETENDRE, ELIZABETH NAME STREET ADDRESS 3000 TAFT STREET CITY-ST-ZIP HOLLYWOOD, FL 33021 TD TITLE NAME IRWIN, THOMAS S STREET ADDRESS 3000 TAFT STREET HOLLYWOOD, FL 33021 CITY-ST-ZIP TITLE **VGM** POLLARD, JOHN NAME STREET ADDRESS 3000 TAFT ST HOLLYWOOD, FL 33021 CITY-ST-7IP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME

U00000920993 05/14/08-80065-017 150.00

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 10 or Block 11 if changed, or on an attachmen th an address, with alkother like empowered.

SIGNATURE:

STREET ADDRESS CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Daytime Phone #