


2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # J87394 1. Entity Name A-OK JETS, INC.	
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Principal Place of Business % DAVID C. HARDIN 500 E BROWARD BLVD, STE 1950 FT. LAUDERDALE, FL 33394	Mailing Address % DAVID C. HARDIN 500 E BROWARD BLVD, STE 1950 FT. LAUDERDALE, FL 33394
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DO NOT WRITE IN THIS SPACE



01132005 No Chg-P CR2E034 (10/03)

4. FEI Number 65-0246121	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

HARDIN, DAVID C.
 500 E BROWARD BLVD, STE 1950
 FT. LAUDERDALE, FL 33394

DO NOT WRITE
IN THIS SPACE

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 the obligations of registered agent.

SIGNATURE _____ DATE _____
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, 2005 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE	DPS
NAME	BAUR, THOMAS E.
STREET ADDRESS	1575 W. COMMERCIAL BLVD, HANGAR 38
CITY - ST - ZIP	FT. LAUDERDALE, FL
TITLE	DVP
NAME	BAUR, CINDY
STREET ADDRESS	1575 W. COMMERCIAL BLVD, HANGAR 38
CITY - ST - ZIP	FT. LAUDERDALE, FL
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

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100000321253
 04/21/05-80072-001 150.00

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 attachment, with an address, with all other fees empowered.

SIGNATURE:  APR 08 2005 954-772-4696
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Day/Time Phone #