## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## **FILED** Apr 10, 2006 08:00 AM DOCUMENT # M93425 **Secretary of State** 1. Entity Name JET SETTERS TRAVEL, INC. Principal Place of Business Mailing Address 2060 NE COACHMAN ROAD 2060 NE COACHMAN ROAD CLEARWATER, FL 34625 CLEARWATER, FL 34625 03312006 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 59-2910883 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Rogistered Agent CLINE, WENDY DO NOT WRITE 2060 NE COACHMAN ROAD CLEARWATER, FL 33765 IN THIS SPACE 2. 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. RIOTE: Registered Agent agnature required when renstating na of teorstened accordand little if accidental DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 Trust Fund Contribution. Added to Fees 10. **DEFICERS AND DIRECTORS** DP MLE CLINE, WENDY HALLET STREET ADDRESS 2060 N.E. COACHMAN RD. CTY-ST-ZP CLEARWATER, FL 33765 U00000497064 04/22/06-80038-019 150.00 TOTE NAME STREET ADDRESS CITY-ST-ZIP MARKE STREET ADDRESS DO NOT WRITE CITY-ST-ZP TTLE IN THIS SPACE MANE STREET ADDRESS CITY-ST-ZP TIRE NAME STREET ADDRESS CITY-51-28 TITLE NASAF STREET ADDRESS

12. Increby certify that the information supplied with this filling 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 each; 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 like empowered.

SIGNATURE:

IVED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR