

**FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00**

**CORPORATION  
ANNUAL REPORT  
1995**



FLORIDA DEPARTMENT OF STATE  
Tallahassee, Florida  
January 1, 1996

**FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS**

95 FEB 15 PM 2:57

**DOCUMENT # P93000082275 (7)**

1. Corporation Name

**FLORIDA JET, INC.**

Principal Place of Business

**5500 N.W. 21ST TERRACE  
HANGAR 18, EXECUTIVE AIRPORT  
FORT LAUDERDALE FL 33309**

Mailing Address

**5500 N.W. 21ST TERRACE  
HANGAR 18, EXECUTIVE AIRPORT  
FORT LAUDERDALE FL 33309**

2. Principal Place of Business

**21 2665 NW 56th STREET**  
State Apt. No.

2a. Mailing Address

**26 2665 NW 56th STREET**  
State Apt. No.

3. Date of Report (12/31/95)

**12/02/1993**

3a. Report Due Date

**05/31/1994**

4. FIC Number

**APPLIED FOR 65-0498761**

Applied For

**65-0498761**

5. Certificate of Status Document

☐

**\$8.75 Additional  
Fee Required**

6. Election Campaign Financing

☐

**\$5.00 May Be  
Added to Fees**

8. This corporation has liability for intangible tax under 11-1900, C., Florida Statutes ☐ Yes ☒ No

**22 HANGAR 54**  
City & State

**27 HANGAR 54**  
City & State

**23 FORT LAUDERDALE, FL**  
Zip

**28 FORT LAUDERDALE, FL**  
Zip

**24 33309**

**25 USA**

**29 33309**

**30 USA**

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**BALDOVIN, PAUL A JR.  
2424 N. FEDERAL HIGHWAY  
SUITE 405  
BOCA RATON FL 33431**

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

**FL**

85

Zip Code

11. Pursuant to the provisions of Sections 607.0507 and 607.1508, Florida Statutes, for above named corporation submit the statement for the purpose of changing its registered agent or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. Then by accept this appointment as registered agent, I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature of Registered Agent

Signature of New Registered Agent

12. OFFICERS AND DIRECTORS

13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS

|                    |                                          |
|--------------------|------------------------------------------|
| 1. NAME            | <b>D ROBERTSON, TERRY N</b>              |
| 2. STREET ADDRESS  | <b>5500 N.W. 21ST TERRACE, HANGAR 18</b> |
| 3. CITY, ST, ZIP   | <b>FORT LAUDERDALE FL 33309</b>          |
| 4. NAME            | <b>D TAKACS, JOHN</b>                    |
| 5. STREET ADDRESS  | <b>5500 N.W. 21ST TERRACE, HANGAR 18</b> |
| 6. CITY, ST, ZIP   | <b>FORT LAUDERDALE FL 33309</b>          |
| 7. NAME            |                                          |
| 8. STREET ADDRESS  |                                          |
| 9. CITY, ST, ZIP   |                                          |
| 10. NAME           |                                          |
| 11. STREET ADDRESS |                                          |
| 12. CITY, ST, ZIP  |                                          |
| 13. NAME           |                                          |
| 14. STREET ADDRESS |                                          |
| 15. CITY, ST, ZIP  |                                          |
| 16. NAME           |                                          |
| 17. STREET ADDRESS |                                          |
| 18. CITY, ST, ZIP  |                                          |
| 19. NAME           |                                          |
| 20. STREET ADDRESS |                                          |
| 21. CITY, ST, ZIP  |                                          |

|                    |  |                                                              |
|--------------------|--|--------------------------------------------------------------|
| 1. NAME            |  | <input type="checkbox"/> Change <input type="checkbox"/> Add |
| 2. NAME            |  |                                                              |
| 3. STREET ADDRESS  |  |                                                              |
| 4. CITY, ST, ZIP   |  |                                                              |
| 5. NAME            |  |                                                              |
| 6. NAME            |  |                                                              |
| 7. STREET ADDRESS  |  |                                                              |
| 8. CITY, ST, ZIP   |  |                                                              |
| 9. NAME            |  |                                                              |
| 10. NAME           |  |                                                              |
| 11. STREET ADDRESS |  |                                                              |
| 12. CITY, ST, ZIP  |  |                                                              |
| 13. NAME           |  |                                                              |
| 14. NAME           |  |                                                              |
| 15. STREET ADDRESS |  |                                                              |
| 16. CITY, ST, ZIP  |  |                                                              |
| 17. NAME           |  |                                                              |
| 18. NAME           |  |                                                              |
| 19. STREET ADDRESS |  |                                                              |
| 20. CITY, ST, ZIP  |  |                                                              |

14. I hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 11-1900, Florida Statutes. I certify that the information included on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath. I am an officer or director of this corporation or the receiver of a corporation empowered to execute this report as required by Chapter 190, Florida Statutes, and that my name appears on Block 12 of Block 13 of this report as an officer or director with an address.

**SIGNATURE:**   
President  
**Terry N. Robertson**

**1/25/95 491-6776**