

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)


FILED
Jun 04, 2003 8:00 am
Secretary of State

06-04-2003 90094 048 ***150.00

0644273 AT

DOCUMENT # P95000034165

1. Entity Name
ABLE JETS, INC.



Principal Place of Business
3060 AIRMANS DR
FORT PIERCE FL 34946
US

Mailing Address
PO BOX 3689
FORT PIERCE FL 34948



2. Principal Place of Business
Suite, Apt. #, etc.
City & State
Zip Country

3. Mailing Address
Suite, Apt. #, etc.
City & State
Zip Country

CHECK HERE IF MAKING CHANGES

4. FEI Number 65-0595432 Applied For Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
BURDSALL, GARY
420 SOPWITH DRIVE
VERO BEACH FL 32968

7. Name and Address of New Registered Agent
Name
Street Address (P.O. Box Number is Not Acceptable)
City **FL** 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE GARY L. BURDSALL PRESIDENT 04-16-03
Signature typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

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

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD BURDSALL, GARY L P.O. BOX 3689 N/A FORT PIERCE FL 34948 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PDT <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPT PRICE, ERIC 5555 EMERSON AVE FORT-PIERCE FL 34951 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AVPS HOEHN, JAMES K 6961 NW HARTNEY WAY PORT ST LUCIE FL <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPS <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: GARY L. BURDSALL PRESIDENT 04-16-03 772-465-0893
Signature typed or printed name of signing officer or director Date Daytime Phone #

CR2E034 (10/02)

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WORLDWIDE
HEADQUARTERS
3050 Airmens Drive
Fort Pierce, FL 34946
ph: (861) 465-0893
fax: (861) 465-7903

June 2, 2003

Division of Corporations
409 East Gaines Street
Tallahassee, FL 32399

Ladies and Gentlemen:

Enclosed please find our Uniform Business Report for 2003. As I am sure you have noticed this filing is arriving late. I have been away from the company and in California for several weeks dealing with the estate of a family member. Mr. Burdsall placed the Uniform Business Report on my desk to be sent in April. Neither of us expected I would be called away, and under the circumstance, neither of us remembered the report until I returned. Because of my extenuation circumstance, and because we have not filed late in the past, I would like to ask that our late fees be waived for this filing. Thank you for your consideration and I look forward to your favorable reply.

Sincerely yours,

Wayne Livingston
Controller

