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PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
May 01 1996 8:00 am  
Secretary of State

DOCUMENT # P93000051845 (4)

1. Corporation Name

FLORIDA JET SERVICE, INC.



Principal Place of Business

Mailing Address

8600 PINES BLVD  
PEMBROKE PINES FL 33024

8600 PINES BLVD  
PEMBROKE PINES FL 33024

3. Date Incorporated or Qualified

07/23/1993

3a. Date of Last Report

05/01/1995

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc

Suite, Apt. #, etc

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

MAROONE, MICHAEL E  
8600 PINES BLVD  
PEMBROKE PINES FL 33024

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 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

*Michael E. Maroone*

MICHAEL E. MAROONE

4-30-96

Signature, typed or printed name of registered agent, if not applicable

(If Not Registered Agent signature required when re-stating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE V ☐ DELETE

NAME MAROONE, ALBERT E  
STREET ADDRESS 8600 PINES BLVD  
CITY-ST-ZIP PEMBROKE PINES FL 33024

1.1 TITLE ☐ Change ☐ Addition

TITLE ST ☐ DELETE

NAME MAROONE, MICHAEL E  
STREET ADDRESS 8600 PINES BLVD  
CITY-ST-ZIP PEMBROKE PINES FL 33024

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

TITLE P ☐ DELETE

NAME ROBERTSON, TERRY 2  
STREET ADDRESS 8600 PINES BLVD.  
CITY-ST-ZIP PEMBROKE PINES FL 33024

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

TITLE VPCF ☐ DELETE

NAME REESE, DONALD J.  
STREET ADDRESS 2682 EDGEWATER COURT  
CITY-ST-ZIP FT LAUDERDALE FL

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

TITLE VP ☐ DELETE

NAME HODGEN, BRADLEY N.  
STREET ADDRESS 729 CRYSTAL COURT  
CITY-ST-ZIP FT. LAUDERDALE FL

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated 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; 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 12 or Block 13 if changed or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Michael E. Maroone

4-30-96

DATE

(954) 423-3300

DAYTIME PHONE #

CR2E034 (12/95)