2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Jan 26, 2006 08:00 AM Secretary of State CR2E034 (11/05) 01102006 No Chg-P 4. FEI Number 59-1301864 Applied For Not Applicable \$8.75 Additional Fee Required 5. Certificate of Status Desired DO NOT WRITE IN THIS SPACE DO NOT WRITE

DOC	UMI	ENT	#3	681	135

1. Entity Name

SOUTHEASTERN JET CORPORATION



Principal Place of Business

2480 E COMMERCIAL BLVD STE 4 FT. LAUDERDALE, FL 3330B

Mailing Address

2480 E COMMERCIAL BLVD STE 4 FT. LAUDERDALE, FL 33308

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

MEHALLIS, STEPHEN G.	
WIETHELIO, OTEFFIEN G.	
2480 E. COMMERCIAL BLVD STE 4	
FT LAUDERDALE, FL 33308	

	named onlify submits this statement for the plants of registered agent.	urpose of changing its registered	office or r	egistered agent, or bo	oth, in the State of Florida. I am familia	r with, and acce		
SIGNATURE Signature, typed or printed name of registered agent and title if applicable (ROTE: Registered Agent signature required when reinstalling)								
FIL After Ma	E NOWIII FEE IS \$150.00 by 1, 2006 Fee will be \$550.00	Election Campaign Financ Trust Fund Contribution.	~ ;	\$5.00 May Be Added to Fees	UN0000402192 02/02/06-30076-006	150.00		
10. OFFICERS AND DIRECTORS								
TITLE	PD				•			
NAME	MANGURIAN, H.T., JR.				· · ·			
STREET ADDRESS	2480 E COMMERCIAL BLVD STE 4				•			
City-St-Zip	FORT LAUDERDALE, FL 33308				,			
TITLE	VD		**		•			
NAME	MEHALLIS,S.G.				4 }			
STREET ADDRESS	2480 E COMMERCIAL BLVD STE 4							
CITY OF THE	FORT AMPERDALE TO SOME				(

IN THIS SPACE

City-St-Zii FORT LAUDERDALE, FL 33308 MLE PIANA, BETH PANESH NAME 2480 E COMMERCIAL BLVD STE 4 STREET ADDRESS CITY-ST-ZIP FORT LAUDERDALE, FL 33308 TITLE NAME STREET ADDRESS CITY-ST-ZIP 3333 F NAME STREET ADDRESS CITY-ST-ZIP ME NAME STREET ADDRESS CITY-ST-ZIP

this fing does not qualify for the exemptions contained in Chapter 119. Florida Statutes. I further certify that the information true and securate and that my signature shall have the same legal effect as if made under path; that I am an officer or director were only execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if the all place like empowered. 12. I hereby certify that the information supplied with this indicated on this report or supplemental reportify the of the corporation or the receiver of trustee employer changed, or on an attackment with an address with.

SIGNATURE:

AME OF SIGHING OFFICER OR DIRECTOR SCTY. Treas.

Beth P. Piana,

1/20/2006

(954) 491-1722

Devima Phone #