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FILED
Feb 28 1997 8:00am
Secretary of State

PROFIT CORPORATION
 ANNUAL REPORT
1997



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

DOCUMENT # F50029

(0)

1. Corporation Name
JETSET AIRMOTIVE, INC.



Principal Place of Business
**6065 NW 167TH STREET
 B21
 MIAMI FL 33015**

Mailing Address
**6065 NW 167TH STREET
 B21
 MIAMI FL 33015-4327**

3. Date Incorporated or Qualified **10/16/1981** 3a. Date of Last Report **01/19/1996**

2. Principal Place of Business

2a. Mailing Address

4. FEI Number **59-2141810** Applied For
 Not Applicable

22 Suite, Apt. #, etc.

27 Suite, Apt. #, etc.

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

23 City & State

28 City & State

6. Election Campaign Financing Trust Fund Contribution **\$5.00 May Be Added to Fees**

24 Zip

25 Country

29 Zip

30 Country

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**BLAXBERG, GRAYSON & SING P
 25 S.E. 2ND AVE., SUITE 730
 ATTN: SEYMOUR SINGER
 MIAMI FL 33131**

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

Signature of Corporation Officer or Director (if applicable)

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE DELETE
 NAME **VD RODRIGUEZ, KHRISTIAN**
 STREET ADDRESS **5566 N.W. 200TH ST.**
 CITY, ST, ZIP **MIAMI FL**

1.1 TITLE Change Addition
 1.2 NAME
 1.3 STREET ADDRESS **19010 N.W. 57 AVE APT# 210**
 1.4 CITY-ST-ZIP **MIAMI, FL 33015**

TITLE DELETE
 NAME **PD ALBA, IGNACIO**
 STREET ADDRESS **2820 S.W. 4TH STREET**
 CITY, ST, ZIP **MIAMI FL**

2.1 TITLE Change Addition
 2.2 NAME
 2.3 STREET ADDRESS **7625 HARDING AVE APT# 7**
 2.4 CITY-ST-ZIP **MIAMI BEACH, FL 33141**

TITLE DELETE
 NAME **STD BINGSFIELD, JACQUELINE W**
 STREET ADDRESS **18321 N.W. 86TH AVENUE**
 CITY, ST, ZIP **MIAMI FL**

3.1 TITLE Change Addition
 3.2 NAME
 3.3 STREET ADDRESS
 3.4 CITY-ST-ZIP

TITLE DELETE
 NAME
 STREET ADDRESS
 CITY, ST, ZIP

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

TITLE DELETE
 NAME
 STREET ADDRESS
 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 does not qualify for the exemption stated in Section 119.07(3)(i), 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, changed, or on an attachment with an address.

SIGNATURE: *Jacqueline W Bingsfield*
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Jacqueline Bingsfield 2/20/97 305-825-2001
 DATE DAYTIME PHONE #

CR2E034 (9/96)