

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

PROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # **F91073 (9)**

1. Corporation Name  
**JET CONSTRUCTION AND SUPPLY CORPORATION, INC.**



Principal Place of Business: **199 RAINTREE CIRCLE DELAND FL 32724**  
Mailing Address: **199 RAINTREE CIRCLE DELAND FL 32724**

2. Principal Place of Business: 21. State, Apt. #, etc. 22. City & State. 23. Zip. 24. Country. 25. Country. 26. Mailing Address: 27. State, Apt. #, etc. 28. City & State. 29. Zip. 30. Country.

3. Date Incorporated or Qualified: **07/19/1982**  
3a. Date of Last Report: **03/16/1995**  
4. FEI Number: **59-2578276**  
5. Certificate of Status Desired:  \$8.75 Additional Fee Required  
6. Election Campaign Financing Trust Fund Contribution:  \$5.00 May Be Added to Fees  
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

**GHISELLINI, AUGUST  
199 RAINTREE CIRCLE  
DELAND FL 32724**

81. Name  
82. Street Address (P.O. Box Number is Not Acceptable)  
83.  
84. City  
85. Zip Code

11. Pursuant to the provisions of Sections 607.0602 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 I accept the obligations of Section 607.0602, Florida Statutes.

SIGNATURE

12. OFFICERS AND DIRECTORS

12.1 TITLE	12.2 NAME	12.3 STREET ADDRESS	12.4 CITY, STATE, ZIP	12.5 TITLE	12.6 NAME	12.7 STREET ADDRESS	12.8 CITY, STATE, ZIP	12.9 TITLE	12.10 NAME	12.11 STREET ADDRESS	12.12 CITY, STATE, ZIP
	PD	GHISELLINI, AUGUST	199 RAINTREE CIRCLE DELAND FL	<input type="checkbox"/> DELETE							
	STD	GHISELLINI, JOSEPH	22 E 82ND ST NEW YORK CITY NY	<input type="checkbox"/> DELETE							

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

13.1 TITLE	13.2 NAME	13.3 STREET ADDRESS	13.4 CITY, STATE, ZIP	13.5 TITLE	13.6 NAME	13.7 STREET ADDRESS	13.8 CITY, STATE, ZIP	13.9 TITLE	13.10 NAME	13.11 STREET ADDRESS	13.12 CITY, STATE, ZIP
<input type="checkbox"/> Change	<input type="checkbox"/> Addition										

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. 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 of Block 13, if changed, or on an attached sheet with an address.

SIGNATURE: **AUGUST A. GHISELLINI**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E084 (12/95)