2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT #

City & State

EVANS, MARGARET R 13500 BRYNWOOD LANE

FORT MYERS FL 33912

Zip

F95000004299



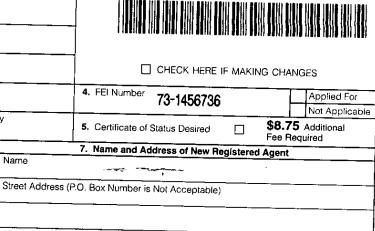
FILED Jan 13, 2003 8:00 am Secretary of State

01-13-2003 90089 040 ***150.00

1. Entity Name JET WORKS, INC.		
Principal Place of Business 13500 BRYNWOOD LANE FORT MYERS FL 33912 US	Mailing Address 13500 BRYNWOOD LANE FORT MYERS FL 33912 US	
2. Principal Place of Business	3. Mailing Address	
Suite, Apt. #, etc.	Suite, Apt. #, etc.	

City & State

Zip



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 SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Country

Name

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

Country

6. Name and Address of Current Registered Agent

9. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE ☐ Delete TITLE ☐ Change NAME **EVANS. MARGARET** Addition NAME STREET ADDRESS 13500 BRYNWOOD LANE STREET ADDRESS CITY-ST-ZIP FORT MYERS FL 33912 CITY-ST-ZIP TITLE CSD ☐ Delete TITLE NAME ☐ Change EVANS, CARL K Addition NAME STREET ADDRESS 13500 BRYNWOOD LANE STREET ADDRESS CITY-ST-ZIP FORT MYERS FL 33912 CITY-ST-ZIP TITLE PD ☐ Delete TITLE NAME ☐ Change ☐ Addition EVANS, MARGARET R STREET ADDRESS 13500 BRYNWOOD LANE STREET ADDRESS CITY-ST-ZIP FORT MYERS FL CITY-ST-ZIP ☐ Delete □ Change ☐ Addition EVANS, CARL K NAME STREET ADDRESS 13500 BRYNWOOD LANE STREET ADDRESS CITY-ST-ZIP FORT MYERS FL 33912 CITY-ST-ZIP TITLE Delete TITLE ☐ Change NAME ■ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP

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 changed, or on an attachment with an address, with all other like empowered.

IND TYPED OR PRINTED NA