



# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Feb 10, 2006 8:00 am**  
**Secretary of State**

02-10-2006 90034 022 \*\*\*150.00

|   |   |   |  |  |  |
|---|---|---|--|--|--|
| <b>DOCUMENT # F96000004593</b><br>1. Entity Name<br><b>INTER-JET SYSTEMS, INC.</b>  |   |   |  |   |  |
| Principal Place of Business<br><b>151-04 132ND AVE.</b><br><b>JAMAICA, NY 11434 US</b>  |   |   | Mailing Address<br><b>151-04 132ND AVE.</b><br><b>JAMAICA, NY 11434 US</b>   |  |  |
| 2. Principal Place of Business<br><br>Suite, Apt. #, etc.   |   | 3. Mailing Address<br><br>Suite, Apt. #, etc. |  |  |  |
| City & State  |   | City & State                                  |  | 01122006    Chg-P    CR2E034 (11/05)   |  |
| Zip   |   | Country                                       |  | 4. FEI Number<br><b>11-2478693</b>   |  |
| 5. Certificate of Status Desired <input type="checkbox"/>   |   | <b>\$8.75 Additional Fee Required</b>         |  |  |  |
| 6. Name and Address of Current Registered Agent<br><br><b>NRAI SERVICES, INC.</b><br><b>2731 EXECUTIVE PARK DRIVE</b><br><b>SUITE 4</b><br><b>WESTON, FL 33331</b>  |   |   | 7. Name and Address of New Registered Agent<br><br>Name<br>Street Address (P.O. Box Number is Not Acceptable)<br>City                      |  |  |
| 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 the obligations of registered agent.   |   |   | Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) |  |  |
| SIGNATURE _____ DATE _____  |   |   | 9. Election Campaign Financing <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>   |  |  |
| <b>FILE NOW!!! FEE IS \$150.00</b><br><b>After May 1, 2006 Fee will be \$550.00</b>   |   |   | 10. OFFICERS AND DIRECTORS   |  |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP  | <b>P</b><br><b>GALLAHAN, JOHN M</b><br><b>1631 MILLERS LANE</b><br><b>MANAKIN-SABOT, VA 231022517</b> |   | 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11  |  |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP  | <b>S</b><br><b>HARTNETT, KEVIN</b><br><b>8 SOUND SHORE BLVD</b><br><b>GREENWICH, CT 06830</b>         |   | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP   |  |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP  | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP  |   | <b>Secretary</b><br><b>Mark Atzbi</b><br><b>151-04 132nd Avenue</b><br><b>Jamaica, NY 11434</b>  |  |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP  | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP  |   | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP   |  |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP  | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP  |   | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP   |  |  |
| 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 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 10 or Block 11 if changed, or on an attachment with an address with all other like empowered. |   |   |  |  |  |
| <b>SIGNATURE:</b> _____ <b>Mark Atzbi</b> <b>2/6/06</b> <b>718-276-8500</b><br>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR    Date    Daytime Phone #  |   |   |  |  |  |