

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F96000004593

FILED  
Feb 05, 2008  
Secretary of State

Entity Name: INTER-JET SYSTEMS, INC.

**Current Principal Place of Business:**

5 HIGH RIDGE PARK  
ATT: MARK ATZBI  
STAMFORD, CT 06905 US

**New Principal Place of Business:**

**Current Mailing Address:**

5 HIGH RIDGE PARK  
ATT: MARK ATZBI  
STAMFORD, CT 06905 US

**New Mailing Address:**

FEI Number: 11-2478693      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

NRAI SERVICES, INC.  
2731 EXECUTIVE PARK DRIVE  
SUITE 4  
WESTON, FL 33331 US

**Name and Address of New Registered Agent:**

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.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: GALLAHAN, JOHN M  
Address: 1631 MILLERS LANE  
City-St-Zip: MANAKIN-SABOT, VA 231022517

Title: S ( ) Delete  
Name: HARTNETT, KEVIN  
Address: 8 SOUND SHORE BLVD  
City-St-Zip: GREENWICH, CT 06830

Title: S ( ) Delete  
Name: ATZBI, MARK  
Address: 5 HIGH RIDGE PARK  
City-St-Zip: STAMFORD, CT 06905

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition  
Name: LACCONA, GIORGIO  
Address: 5 HIGH RIDGE PARK  
City-St-Zip: STAMFORD, CT 06905

Title: VP (X) Change ( ) Addition  
Name: DIAZ, MIGDALIA  
Address: 5 HIGH RIDGE PARK  
City-St-Zip: STAMFORD, CT 06905

Title: T (X) Change ( ) Addition  
Name: ATZBI, MARK  
Address: 5 HIGH RIDGE PARK  
City-St-Zip: STAMFORD, CT 06905

Title: S ( ) Change (X) Addition  
Name: ALTMAN, RICHARD  
Address: 5 HIGH RIDGE PARK  
City-St-Zip: STAMFORD, CT 06905

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MARK ATZBI

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02/05/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date