

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F99000000061

FILED
Apr 10, 2006
Secretary of State

Entity Name: JET SALES AND SERVICES, INC.

Current Principal Place of Business:

8191 N. TAMIAMI TRAIL
SUITE 200
SARASOTA, FL 34243

New Principal Place of Business:

Current Mailing Address:

8191 N. TAMIAMI TRAIL
SUITE 200
SARASOTA, FL 34243

New Mailing Address:

FEI Number: 87-0561798

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JONES, MIKE
8191 N. TAMIAMI TRAIL
SUITE 200
SARASOTA, FL 34243 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: JONES, MIKE
Address: 8191 N TAMIAMI TRAIL, STE 200
City-St-Zip: SARASOTA, FL 34243

Title: S () Delete
Name: JONES, BARBARA J
Address: 8191 N TAMIAMI TRAIL, STE 200
City-St-Zip: SARASOTA, FL 34243

Title: CD () Delete
Name: SAXTON, JERRY D
Address: 1540 BENT CREEK DRIVE
City-St-Zip: SOUTHLAKE, TX 76092

Title: VP () Delete
Name: PHILLIPS, STEWART
Address: 8191 N TAMIAMI TRAIL, STE 200
City-St-Zip: SARASOTA, FL 34243

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: BARBARA J. JONES

S

04/10/2006

Electronic Signature of Signing Officer or Director

Date