2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# J09569

FILED Jan 31, 2003 Secretary of State

Entity Name: JET WASTEWATER SYSTEMS, INC.

| Current Principal Place of Business: | | New Principal Place | New Principal Place of Business: | | |
|---|---|--|-----------------------------------|--|--|
| 127 INDUS SUITE E BIG PINE K | TRIAL RD EY, FL 33043 | US | | | |
| Current Mailing Address: | | | New Mailing Address | New Mailing Address: | |
| 127 INDUS SUITE E BIG PINE K | TRIAL RD EY, FL 33043 | US | | | |
| FEI Number: | 59-2726491 | FEI Number Applied For () | FEI Number Not Applicable () | Certificate of Status Desired () | |
| Name and Address of Current Registered Agent: | | | Name and Address of | Name and Address of New Registered Agent: | |
| 127 INDÚS SUITE E | W. THOMMES TRIAL RD EY, FL 33043 | US | | | |
| The above | named entity of | | | | |
| in the State | | ubmits this statement for the p | urpose of changing its registered | d office or registered agent, or both, | |
| | of Florida. | ubmits this statement for the p | urpose of changing its registered | d office or registered agent, or both, | |
| in the State | of Florida. E: | ubmits this statement for the p | | d office or registered agent, or both, Date | |
| in the State SIGNATUR Election Cam | of Florida. E: Electronic | c Signature of Registered Age Trust Fund Contribution (). | ent | | |
| in the State SIGNATUR Election Cam | ef Florida. Electronic spaign Financing AND DIRECT | C Signature of Registered Age Trust Fund Contribution (). ORS: Delete OKS WILL, IAM . RD., SUITE E | ant ADDITIONS/CHANGE | Date | |

I hereby certify that the information supplied with this filing does not qualify for the 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 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: BROOKS W. THOMMES PD 01/31/2003