## 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

## FILED Apr 30, 2007 8:00 am Secretary of State

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DOCUMENT # L02000019453  1. Entity Name F-JET CHARTERS, LLC							007 90061		
Principal Place 1306 WEST N TAMPA, FL 3	KENNEDY BOULEVARD	Mailing Address 1306 WEST KENNEDY BOULEVARD TAMPA, FL 33606		1.1881811					
2. Principal Place of Business - No P.O. Box #		3. Mailing Address							
Suite, Apt. #, etc.		Suite, Apt. #, etc.			04202007	Chg-LLC	CR2E0	83 (12/06)	
City & State		City & State		l l	4. FEI Number Applied For 81-0563526 Not Applicable				
Zip Country		Zip Count		ry	5. Certificate of Status Desired			\$5.00 Additional	
	6. Name and Address of Current	Registered Agent		•	7. Name and	Address of New I	Registered A	Agent	
	• • •			Name					
	, STEPHEN B II T KENNEDY BOULEVARD L 33606	Street Address		ss (P.O. Box Numb	(P.O. Box Number is Not Acceptable)				
			}	City				Zip Code	
The above named entity submits this statement for the purpose of changing its registered office or					istered agent, or bo	th, in the State of Fl	FL lorida. I am f	:l:	
the obligati	ions of registered agent.								
SIGNATURE .									
	Signature, typed or printed name of registered agent	and title if applicable. (NOTE	: Registered	Agent signeture req	quired when reinstating)		DATE		
Fi Di	iling Fee is \$50.00 ue by May 1, 2007		: Registered	Agent signature req	quired when reinstating)		bate ke check partme	•	•
Fi Di	iling Fee is \$50.00 ue by May 1, 2007 MANAGING MEMBE		Registered			Florid	ke check p	ent of State	•
Dı	iling Fee is \$50.00 ue by May 1, 2007 MANAGING MEMBE MGR					Florid	ke check p la Departm	ent of State	Addition
9. TITLE NAME	iling Fee is \$50.00 ue by May 1, 2007 MANAGING MEMBE MGR FARRIOR, PRESTON L	RS/MANAGERS	10. TITLE	M <sub>0</sub>		Florid	ke check p la Departm	ent of State	
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11. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company of the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: 4/17/07
Stephen B. Straske II 4/17/07
SIGNATURE AND TYPES OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE DAY