1 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L06000019594

1. Entity Name WORLDWIDE JETS, LLC



FILED Jan 09, 2008 08:00 AN Secretary of State

Principal Place of Business 9958 CYPRESS VINE DRIVE ORLANDO, FL 32827

Mailing Address 9958 CYPRESS VINE DRIVE ORLANDO, FL 32827



DO NOT WRITE IN THIS SPACE

01062008 No Chg-LLC

CR2E083 (12/07)

4. FEI Number 20-8093645

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

GRECO, PHIL 9958 CYPRESS VINE DRIVE ORLANDO, FL 32827

the obligations of registered agent.

limited liability company

SIGNATURE:

DO NOT WRITE IN THIS SPACE

2007

SIGNATURE	Signature, typed or printed name of registered agent and title if applicable.	(NOTE: Registered Agent signature required when remetating)	DATE
FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75			
9.	MANAGING MEMBERS/MANAGERS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM GRECO, PHIL 9958 CYPRESS VINE DRIVE ORLANDO, FL 32827		
TITLE NAME STREET ADDRESS CITY-ST-ZIP			U00000776891 01/09/08-80042-009 138.75
TITLE NAME STREET ADDRESS CTY-ST-ZIP		DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY+ST-ZIP		IN	THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
11. 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 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 or affective 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 or affective 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 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 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 or affective certification.			

SER, OR AUTHORIZED REPRESENTATIVE

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