

**2004 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Apr 22, 2004 08:00 AM
Secretary of State

DOCUMENT # M01000000013

1. Entity Name

JET AVIATION BUSINESS JETS-CHARTER, LLC



Principal Place of Business

**ATTN: OFFICE OF THE CFO
114 CHARLES A. LINDBERGH DR.
TETERBORO, NJ 07608**

Mailing Address

**ATTN: OFFICE OF THE CFO
114 CHARLES A. LINDBERGH DR.
TETERBORO, NJ 07608**



04162004 No Chg-LLC

CR2E083 (10/03)

4. FEI Number

22-3763955

Applied For

Not Applicable

5. Certificate of Status Desired



**\$5.00 Additional
Fee Required**

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

**CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525**

**DO NOT WRITE
IN THIS SPACE**

B. 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 the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$50.00
Due by May 1, 2004**

U000000125209
04/22/04-80075-016 55.00

9. MANAGING MEMBERS/MANAGERS

TITLE	MGRM
NAME	JET AVIATION BUSINESS JETS, INC.
STREET ADDRESS	114 CHARLES A. LINDBERGH DRIVE
CITY - ST - ZIP	TETERBORO, NJ 07608
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

**DO NOT WRITE
IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

ERIC Montgomery

4/16/2004

(201) 462-4025

Date

Domestic Phone #