

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
May 01, 2003 8:00 am
Secretary of State

05-01-2003 90822 023 ***150.00

DOCUMENT # P00000093421

1. Entity Name
JETT CLEANING, INC.



Principal Place of Business
175 W AIRPORT BLVD
PENSACOLA FL 32505

Mailing Address
175 W AIRPORT BLVD
PENSACOLA FL 32505

2. Principal Place of Business

3. Mailing Address

P.O. Box 6425

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

PENSACOLA FL

Zip

Country

32503

Country

USA

4. FEI Number

59-3680857

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional Fee Required

☒ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

MOORHEAD, STEPHEN R
4300 BAYOU BLVD SUITE 13
PENSACOLA FL 32503

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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 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

FILE NOW!!! FEE IS \$150.00

After May 1, 2003 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution.

☐

\$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **D** ☐ Delete
NAME **JACKSON, JEFFERY R**
STREET ADDRESS **175 W AIRPORT BLVD**
CITY-ST-ZIP **PENSACOLA FL 32505**

TITLE ☒ Change ☐ Addition
NAME **3468 RIVER OAKS LANDING**
STREET ADDRESS **PENSACOLA FL 32514**
CITY-ST-ZIP **PENSACOLA FL 32514**

TITLE **D** ☐ Delete
NAME **BALES, JOHN B**
STREET ADDRESS **175 W AIRPORT BLVD**
CITY-ST-ZIP **PENSACOLA FL 32505**

TITLE ☒ Change ☐ Addition
NAME **6323 SUMMER LAKESIDE**
STREET ADDRESS **PENSACOLA FL 32514**
CITY-ST-ZIP **PENSACOLA FL 32514**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
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NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

JACKSON, JEFFERY R

04-28-03

850-478-5388

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Day/Time Phone #

CR2E034 (10/02)