

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
May 05, 2003 8:00 am
Secretary of State

05-05-2003 91435 030 ***150.00

DOCUMENT # P01000048309

1. Entity Name
EXECUTIVE JET LINK, INC.



Principal Place of Business
9150 W. ATLANTIC BLD., #1715
CORAL SPRINGS, FL 33071

Mailing Address
9150 W. ATLANTIC BLD., #1715
CORAL SPRINGS, FL 33071

2. Principal Place of Business
8634 S. SOUTHGATE
Suite, Apt. #, etc.
SHORES CIRCLE
City & State
TAMARAC, FL
Zip
33321 Country
USA

3. Mailing Address
8634 S. SOUTHGATE
Suite, Apt. #, etc.
SHORES CIRCLE
City & State
TAMARAC, FL
Zip
33321 Country
USA



☐ CHECK HERE IF MAKING CHANGES

4. FEI Number
65-1103196 Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent
BRACHO, JOSE R
9150 W. ATLANTIC BLD., #1715
CORAL SPRINGS, FL 33071

7. Name and Address of New Registered Agent
Name
Street Address (P.O. Box Number, Is Not Acceptable)
8634 S. SOUTHGATE SHORES CIRCLE
City **TAMARAC** FL Zip Code **33321**

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 *JOSE R. BRACHO* **JOSE R. BRACHO - President.** **April 29, 2003**
(NOTE: Registered Agent's signature required when amending) DATE

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 NAME STREET ADDRESS CITY-ST-ZIP	DP BRACHO, JOSE R 9150 W. ATLANTIC BLD., #1715 CORAL SPRINGS, FL 33071 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☒ Change ☐ Addition 8634 S. SOUTHGATE SHORES CIRCLE TAMARAC, FL 33321
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DST REYES, IRIA 9150 W. ATLANTIC BLD., #1715 CORAL SPRINGS, FL 33071 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☒ Change ☐ Addition 8634 S. SOUTHGATE SHORES CIRCLE TAMARAC, FL 33321
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(1), 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: *JOSE R. BRACHO* **JOSE R. BRACHO - President.** **April 29, 2003** (954) 709-4669
SIGNATURE FULLY TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (10/02)