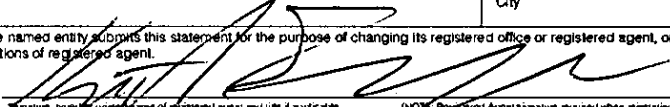
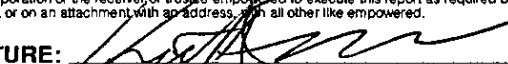


FILED
Feb 24, 2003 8:00 am
Secretary of State

02-24-2003 90962 020 ***150.00

2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)

00000002

DOCUMENT # P01000056501			
1. Entity Name JET CONSULTANTS.NET, INC.			
Principal Place of Business 3857 NW 62 ST. COCONUT CREEK, FL 33073		Mailing Address 3857 NW 62 ST. COCONUT CREEK, FL 33073	
2. Principal Place of Business 8128 Thames Blvd Suite, Apt. #, etc. Suite A City & State Boca Raton, FL Zip 33433 Country USA		3. Mailing Address 8128 Thames Blvd Suite, Apt. #, etc. Suite A City & State Boca Raton, FL Zip 33433 Country USA	
4. FEI Number 65-1112968		Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent SISSON, LARRY A1A FLORIDA CORPORATE SERVICES 218 SOUTHERN COUNTRY LN. QUINCY, FL 32351		7. Name and Address of New Registered Agent 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, typewritten name of registered agent and title if applicable. (NONE Registered Agent signature required when appointing) 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 ☒ Delete NAME DP STREET ADDRESS TURNER, JULES EDWARD CITY-ST-ZIP 3857 NW 62 ST. COCONUT CREEK, FL 33073		TITLE ☐ Change ☐ Addition NAME STREET ADDRESS CITY-ST-ZIP	
TITLE ☐ Delete NAME DV STREET ADDRESS FRIEDMAN, KEITH CITY-ST-ZIP 112 PEPPERWOOD CT DAYTONA BCH, FL 32119		TITLE ☒ Change ☐ Addition NAME President STREET ADDRESS Keith Friedman CITY-ST-ZIP 8128 Thames Blvd Boca Raton, FL 33433	
TITLE ☒ Delete NAME DS STREET ADDRESS TURNER, MARCY ELLEN CITY-ST-ZIP 3857 NW 62 ST. COCONUT CREEK, FL 33073		TITLE ☐ Change ☐ Addition NAME STREET ADDRESS CITY-ST-ZIP	
TITLE ☐ Delete NAME DT STREET ADDRESS COLLINS, BARBARA CITY-ST-ZIP 931 N. ST. RD 434, ST 1201-278 ALTAMONTE SPRINGS, FL 32714		TITLE ☒ Change ☐ Addition NAME DT STREET ADDRESS Barbara Collins CITY-ST-ZIP 8128 Thames Blvd Boca Raton, FL 33433	
TITLE ☐ Delete NAME STREET ADDRESS CITY-ST-ZIP		TITLE ☐ Change ☐ Addition NAME STREET ADDRESS CITY-ST-ZIP	
TITLE ☐ Delete NAME STREET ADDRESS CITY-ST-ZIP		TITLE ☐ Change ☐ Addition 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:  SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date 2/21/03 407 748 12 08 Daytime Phone #	

CR2E034 (10/02)