

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 12, 2004 08:00 AM
Secretary of State

DOCUMENT # P02000031111

1. Entity Name
CORPORATE JET CONCEPTS, INC.



Principal Place of Business
**27234 LAPALOMA LANE
BROOKSVILLE, FL 34602**

Mailing Address
**27234 LAPALOMA LANE
BROOKSVILLE, FL 34602**



02212004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
02-0578540

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

**KIEFER, NEIL G
26133 U.S. HWY. 19 NORTH
SUITE 100
CLEARWATER, FL 33763-201**

**DO NOT WRITE
IN THIS SPACE**

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, 2004 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

000000086225
03/12/04-80015-014 150.00

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P REY, ROBERT S 27234 LAPALOMA LANE BROOKSVILLE, FL 34602
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V SALOM, ALEX 1281 BENTLEY AVENUE SPRING HILL, FL 34608
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S FLORA, AARON 7514 REGENTS GARDEN WAY APOLLO BEACH, FL 33572
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T MARINO, NICOLE A 965 CANDLELIGHT BLVD #28 BROOKSVILLE, FL 34601
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

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:

Nicole A Marino
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

NICOLE A MARINO

2/23/04

352-585-0009

Date

Daytime Phone #