2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000089234

Entity Name: JETT ELECTRONICS, INC

FILED Feb 13, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 6375 19TH AVE. NORTH 4626 29TH AVENUE NORTH ST. PETERSBURG, FL 33710 ST. PETERSBURG, FL 33710 **Current Mailing Address: New Mailing Address:** PO BOX 17221 CLEARWATER, FL 33762 FEI Number: 33-1000927 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of New Registered Agent: Name and Address of Current Registered Agent: MUNOZ, ABAD MUNOZ, ABAD 6375 19TH AVE. NORTH 4626 29TH AVENUE NORTH ST. PETERSBURG, FL 33710 US US ST. PETERSBURG, FL 33710 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. SIGNATURE: ABAD MUNOZ 02/13/2005 Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition

KINLEY, GARY W PRES Name: Name: 4904 EAST 103RD ST Address: Address: City-St-Zip: TULSA, OK 74137 City-St-Zip: Title: () Delete Title: (X) Change () Addition MUNOZ, ABAD V-PRES Name: Name: MUNOZ, ABAD V-PRES 6375 19TH AVE. NORTH 4626 29TH AVENUE NORTH Address: Address: ST. PETERSBURG, FL 33710 ST. PETERSBURG, FL 33710 City-St-Zip: City-St-Zip: () Delete Title: Title: MS () Change () Addition BRADLEY, JEANETTE SECT Name: Name: 3061 WEST ALBANY Address: Address: City-St-Zip: BROKEN ARROW, OK 74012 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: GARY KINLEY PRES 02/13/2005