

# **2011 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P04000106683

Entity Name: JET ICU LEASING, INC.

**FILED**  
**Feb 07, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

348 SHORE DR  
OZONA, FL 34660

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 554  
OZONA, FL 34660

**New Mailing Address:**

FEI Number: 20-1391523

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

JUDY, FRED M  
348 SHORE DR.  
OZONA, FL 34660 US

**Name and Address of New Registered Agent:**

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: FRED JUDY

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: JUDY, FRED M  
Address: P.O. BOX 554  
City-St-Zip: OZONA, FL 34660

Title: STD  
Name: JUDY, SAMANTHA M  
Address: P.O. BOX 554  
City-St-Zip: OZONA, FL 34660

I hereby 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 all other like empowered.

SIGNATURE: FRED JUDY

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

PD

02/07/2011

\_\_\_\_\_  
Date