
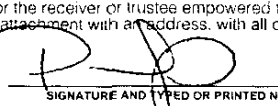


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 16, 2007 8:00 am
Secretary of State

04-16-2007 90074 039 ***150.00

| | | | |
|--|--|--|--|
| DOCUMENT # P05000141290 1. Entity Name JETTEK SERVICES, INC. | |  | |
| Principal Place of Business 6340 49TH ST N PINELLAS PARK, FL 33781 US | | Mailing Address 6340 49TH ST N PINELLAS PARK, FL 33781 US | |
| 2. Principal Place of Business - No P.O. Box # 10360 US Hwy 19 N | | 3. Mailing Address 10360 US Hwy 19 N | |
| Suite, Apt. #, etc. | | Suite, Apt. #, etc. | |
| City & State Pinellas Park FL | | City & State Pinellas Park FL | |
| Zip 33782 | | Zip 33782 | |
| Country US | | Country US | |
| 4. FEI Number 20-3651121 | | Applied For <input type="checkbox"/> Not Applicable | |
| 5. Certificate of Status Desired <input type="checkbox"/> | | \$8.75 Additional Fee Required | |
| 6. Name and Address of Current Registered Agent HETZEL, TARA 634 GREEN VALLEY RD 65 PALM HARBOR, FL 34683 | | 7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) GS 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 _____ <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when resigning) DATE</small> | | | |
| FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 | | 9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$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 | PST HANNON, PHILIP 6340 49TH ST N PINELLAS PARK, FL 33781 | <input type="checkbox"/> Delete | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY- ST- ZIP | VP SEAY, ANITA 6340 49TH ST N PINELLAS PARK, FL 33781 | <input checked="" type="checkbox"/> Delete | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY- ST- ZIP | | <input type="checkbox"/> Delete | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY- ST- ZIP | | <input type="checkbox"/> Delete | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
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| TITLE NAME STREET ADDRESS CITY- ST- ZIP | | <input type="checkbox"/> Delete | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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:  | | 4-11-07 727-549-1986 <small>Date Daytime Phone #</small> | |