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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT # P93000022647 (0)

JET LINK UNLIMITED, INC. Mailing Address Principal Place of Business 7400 WILES ROAD 7400 WILES ROAD SUITE 101 SUITE 101 CORAL SPRINGS FL 33067 CORAL SPRINGS FL 33067 3. Date Incorporated or Qualified 3a. Date of Last Report 03/24/1993 01/18/1995 4. FEI Number 2. Principal Place of Business Applied For 65-0395495 Not Applicable 21 Suite, Apt. #, elo \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State: \$5.00 May Be 6. Election Campaign Financing Trust Fund Contribution Added to Fees 23 8. This corporation has liability for intangible tax under s. 199.032, 24 25 Florida Statutes Yes No 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent Name MURRAY, TIMOTHY Street Address (P.O. Box Number is Not Acceptable) 8891 N.W. 1ST STREET 63 **CORAL SPRINGS FL 33067** 84 Orty 85 Zip Code 11. Pursuant to the provisions of Sections 607,0502 and 607,1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent. Lam familiar with, and accept the obligations of, Section 607,0505, Florida Statutes. SIGNATURE DATE OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12 13. DELETE Addition n L 1 THUE HILL. MURRAY, TIMOTHY 1.2 NAME 1.484 8891 N.W. 1ST STREET STREET ADDRESS 1.3 STREE! ADDRESS (175-51-70 CORAL SPRINGS FL 33067 14 CITY - ST - ZIP DELETE Addition □ Change 101,6 2 1 THILE NAME 2.2 NAME 2.3 STREET ADDRESS 5.0481 1.40004603 24 CiTY - \$1 - 712 DELETE Change 101.6 3 1 THUE Addition NAME 3.2 NAME SIELL ALDERS 3.3 STREET ADDRESS 3.4 CITY | \$1 - ZIP 001*-51-20 DELETE Change Addition H1d 4 1 HILE L.A. 4.2 NAME 4.9 STHEET ACORESS Short Allinoiss 4.4 CITY - ST - ZIP DELETE Change [T] Addition THE F 5 'THLE NAME 5.2 NAME 5.3 STREET ADDRESS Chell Custos CO1--S1-26 5.4 CITY - ST - ZIP DEL ÉTÉ ☐ Addition 5 THLE Trib E 6,253 5.2 NAME STREET ALLORENS 6.3 STHEET ACCRESS

14. I do hereby certify that the information supplied with this fairig is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). Florida Statutes. I further certify that the information indicated on this arrow report or supplemental annual 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 trusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block. 12 or Block 13 if changed, or on an attachaged that the same legal effect as if made under oath, that I am an officer or director of the composition or the receiver or trusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block. 12 or Block 13 if changed, or on an attachaged to the composition of the receiver or trusted empowered to execute this report as required by Chapter 607.

SIGNATURE:

TIMOTHY
SIGNATURE AND TYPED OR PHÍN FEIN ME OF SIGNING OFFICER OR DIRECTOR

TIMOTHY A. MURRAY

1-25-96

1/07-362-7292

(12/95)

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