

2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED

Mar 27, 2008 08:00 AM
Secretary of State

DOCUMENT # P93000064156

1. Entity Name
JET DOCK SYSTEMS, INC.



Principal Place of Business
500 SW 21 TERRACE, B107
FT. LAUDERDALE, FL 33312

Mailing Address
9601 CORPORATE CIRCLE
CLEVELAND, OH 44125 US



02252008 No Chg-P CR2E034 (11/05)

4. FEI Number
65-0436012

Applied For
Not Applicable

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

DO NOT WRITE IN THIS SPACE

8. Name and Address of Current Registered Agent

FABER, DAVID
1301 WEST LAKE DRIVE
FORT LAUDERDALE, FL 33316-2317

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, 2008 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

U000000871382
04/09/08-80129-012 150.00

10. OFFICERS AND DIRECTORS

TITLE	DPT
NAME	FABER, DAVID
STREET ADDRESS	1301 WEST LAKE DRIVE
CITY-ST-ZIP	FORT LAUDERDALE, FL 333162317
TITLE	DVS
NAME	WILLIAM, III E
STREET ADDRESS	48 HASKELL DRIVE
CITY-ST-ZIP	BRATENAHL, OH 44108
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
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 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DAVID T. FABER 3/10/08

Date

Daytime Phone #