## FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

**PROFIT** CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P93000082275 (7)

FLORIDA JET, INC.

CITY-SI-ZIP

STREET ADDRESS

SIGNATURE:

TIFLE NAME

**FILED** Jan 24 1997 8:00am Secretary of State

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Addition

Daytime Phone #

Principal Place 2665 NW 56 S HANGAR 54 FORT LAUDER		Mailing Address 2665 NW 56 ST HANGAR 54 FORT LAUDERDALE FL 33309-2673				{		
US		US				3. Date Incorporated or Qualified 12/02/1993	3a. Date of Last 02/14/1996	
2. Principal P	lace of Business	2a. Mailing Add	dress			4. FEI Number 65-0498761	<del></del>	Applied For Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #	, etc.			5. Certificate of Status Desired	, , , , , ,	Additional Required
City & State	c	City & State	•			Election Campaign Financing     Trust Fund Contribution		May Be
Zip	Country 25	7ip	30	Country		8. This corporation has liability for Florida Statutes		
	9. Name and Address of Curre					10. Name and Address of New Re		
BAL	BALDOVIN, PAUL A JR.				Name	111111111111111111111111111111111111111		
2424 N. FEDERAL HIGHWAY SUITE 405 BOCA RATON FL 33431				82	Street Ado	iress (P.O. Box Number is Not Accepta	ole)	
			83		**************************************			
<u> </u>				84	City		FL 85 Zi	o Code
SIGNATURE	Signature, typed or printed nume of regionsed a	geet and tale if applicable		egistered Age		portation's board of directors. I hereby acce	DATE	
12.	OFFICERS A	ND DIRECTORS	DELETE	13.		ADDITIONS/CHANGES TO OFFIC	Change	
TITLE	ROBERTSON, TERRY N		DECEME	1.1 TITLE	l l		☐ cumilit	. Manifoli
NAME STREET ADDRESS	5500 N.W. 21ST TERRACE, I	HANGAR 18		1.2 NAME 1.3 STREET	4D00000			
CITY - ST - ZIP	FORT LAUDERDALE FL 3330			1.3 SINCE				
TITLE	D		DELETE	21 TITLE			Change	Addition
NAME	TAKACS, JOHN			22 NAME				
STREET ADDRESS	5500 N.W. 21ST TERRACE,			2.3 STREET	ADDRESS			
CITY-ST-ZiP	FORT LAUDERDALE FL 3330			2 4 CITY-	ST - ZIP			
TITLE			DELETE	3.1 TITLE			Change	Addition
NAME				3.2 NAME				
STREET ADORESS				3.3 STREET				
CITY-ST-ZIP			NC) CIT	3.4. CITY~	ST-ZIP		[ ] Ob	
TITLE		LJ L	DELETE	4.1 TITLE			Change	Addition
NAME PERCE ADDRESS				4, 2 NAME	ADDOECO			
STREET ADDRESS				4.3 STREET 4.4 City - S				
CITY-ST-ZIP		П	DELETE	5.1 TITLE	1-IIF		Change	Addition
NAMÉ		- البسم		5.2 NAME	}			
STREET ADDRESS				53 STREFT	ADDRESS			

54 CITY-ST-ZIP

6.3 STREET ADDRESS 6.4 CITY - ST - ZIP 14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information indicated on this annual 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 trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name

6.1 TITLE

6.2 NAME

DELETE

AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

appears in Block 12 or Block 13 if changed, or on an attachment with an address.