

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 06, 2002 8:00 am
Secretary of State

05-06-2002 90232 040 ***150.00

DOCUMENT # P94000043019

1. Entity Name

JB AIRCRAFT LEASING, INC.

Principal Place of Business

**9990 SW 77TH AVENUE
 STE 330
 MIAMI FL 33156
 US**

Mailing Address

**PO BOX 523291
 MIAMI FL 33152
 US**

2. Principal Place of Business

12951 S. Calusa Club Dr
 Suite, Apt. #, etc.

3. Mailing Address

12951 S. Calusa Club Dr
 Suite, Apt. #, etc.

City & State

Miami FL

City & State

Miami FL 33186

4. FEI Number

65-0515201

Applied For

Not Applicable

5. Certificate of Status Desired

☐

**\$8.75 Additional
 Fee Required**

6. Name and Address of Current Registered Agent

**MARCOLIS, JOHN A
 9990 SW 77TH AVENUE
 SUITE 330
 MIAMI FL 33156**

7. Name and Address of New Registered Agent

Name

Esperanza Bonner

Street Address (P.O. Box Number is Not Acceptable)

12951 S. Calusa Club Dr.

City

Miami FL

FL

Zip Code

33186

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
 Tax filing requirement and elects to do so.
 (See criteria on back) ☐

**FILE NOW!!! FEE IS \$150.00
 After May 1, 2002 Fee will be \$550.00
 Make Check Payable to Department of State**

10. Election Campaign Financing
 Trust Fund Contribution. ☐

**\$5.00 May Be
 Added to Fees**

11. OFFICERS AND DIRECTORS

TITLE **P** ☐ Delete
 NAME **BONNER, ESPERANZA M**
 STREET ADDRESS **12951 S CALUSA CLUB DR**
 CITY-ST-ZIP **MIAMI FL 33186**

TITLE **EVP** ☒ Delete
 NAME **BONNER, JOHN F**
 STREET ADDRESS **9990 SW 77TH AVENUE**
 CITY-ST-ZIP **MIAMI FL 33156**

TITLE **V** ☐ Delete
 NAME **MILLOM, ESPERANZA**
 STREET ADDRESS **1251 REDBIRD AVE**
 CITY-ST-ZIP **MIAMI FL 33166**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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 CITY-ST-ZIP

CR2E034 (9/01)

13. I 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 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE **Esperanza Bonner**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

04/22/02

Daytime Phone #