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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997

P96000008514 (7)

DOCUMENT #
1. Corporation Name

JET TELECOM INC.

Principal Place of Business 5215 N DIXIE HWY #C-1

Mailing Address

5215 N DIXIE HWY #C-1 OAKLAND PARK FL 33334-4021

FILED Feb 24 1997 8:00am Secretary of State



OAKLAND PARK FL 33334 OAKLAND PARK FL 33834-		4-4021			
			3. Date Incorporated or Qualified 01/24/1996	3a. Date of Last Report	
2. Principal P	ace of Business 2a. Mailing Address	A .	4. FEI Number	Applied For	
21	211 N DNIG HUM 26 SVIL N	1. DIXIS HW	4 65-063824	Not Applicable	
Suite, Apt	#. etc Suite, Apr. #. etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & Stail	LAND PORK PL. 28 DAKLAN	s pork fl	Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
Ζp	Country Zip	Country	8. This corporation has liability for in	ntangible tax under s. 199.032,	
24 33:	334 25 USA 29 33334	30 USA		Yes No	
	Name and Address of Current Registered Agent		10. Name and Address of New Reg	ilstered Agent	
HAF	RDY, JOHN E	81 Name	81 Name		
521	5 N DIXIE HWY #C-1	82 Street Add	ress (P.O. Box Number is Not Acceptable	le)	
OAI	KLAND PARK FL 33334	0,,000,110,00	(1.0. 00. 10. 10. 10. 10. 10. 10. 10.	- ,	
		83			
		84 City		85 Zip Code	
		City		FL S Z D Code	
office or r	to the previsions of Sections 607.0502 and 607.1508, Florida Statu egistered agent, or both, in the State of Florida. Such change was in farmhar with, and accept the obligations of, Section 607.0505, F	authorized by the corporal	tion's board of directors. I hereby accep	t the appointment as registered	
SIGNATURE	Standare, (specifier pointed name of registered agent and (their applicable) (NO	TE Registered Agent signature requi	red when reinstating)	DATE	
12.	OFFICERS AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICE	ERS AND DIRECTORS IN 12	
TITLE	D DELETE	1.1 TITLE		Change Addition	
NAME.	HARDY, JOHN E	1.2 NAME			
STREET ADDRESS	5215 N DIXIE HWY #C-1	1.3 STREET ADDRESS			
City-St-ZiP	OAKLAND PARK FL 33334	1.4 CITY-ST-ZIP			
TITLE	DELETE	2.1 Trile		Change Addition	
NAME		2.2 NAME		The state of the s	
STREET ADDRESS		2.3 STREET ADDRESS			
			and the second second second	•	
CITY - ST - ZIP TITLE	DELETE	2. 4 CITY - ST - ZIP 3.1 TITLE		Change Addition	
	Land December			Onlings Addition	
MAME		3.2 NAME	<i>:</i>		
STREET ADDRESS		3.3 STREET ADDRESS			
CITY - \$1 - ZIP		3.4. CITY-ST-ZIP			
TITLE	LI DELETE	4.1 TITLE		Change Addition	
NAME		4. 2 NAME			
STREET ADDRESS		4.3 STREET ADDRESS			
CITY - ST - ZIP		4.4 CITY - ST - ZIP			
TITLE	[_] DELETE	5 1 TITLE		Change Addition	
NAME		5.2 NAME			
STHEET ADDRESS		53 STREET ADDRESS			
CITY-ST-ZIP		5.4 City-St-ZiP			
THUE	☐ DELETE	61 TITLE		Change Addition	
NAME		62 NAME			
STREET ADDRESS		63 STREET ADDRESS			
DITY-ST-7/P		6.4 CITY-ST-ZIP			
On (* St. A)	by cartify that the information europlied with this filing dose not gua		d in Contine 110 07/2)/i) Florida Statutor	. I further certify that the	

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

SIGNATURE:

TUNE AND TYPED OR PRINTED NAME OF BIGNING OFFICER OR DIRECTOR

310ENT 2/3/1 (954) 938-003