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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000070503 (3)

JET TRAINING INTERNATIONAL, INC.

FILED May 04 1998 8:00am Secretary of State



						iudi: Duit T oik uuibu kii 1691
Principal Place of Business Mailing Address						
7208 STONEBI SANFORD FL		7206 STONEBROOK DRIVE SANFORD FL 32773		DO NOT WRITE IN TH	HIS SPACE	
					3. Date Incorporated or Qualified	
					08/23/1996	
2. Principal Pi	ace of Business	2a. Mailing Address			4. FEI Number	Applied For
21		26		59-3425311	Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.			\$8.75 Additional	
27					5. Certificate of Status Desired	Fee Required
City & State		City & State	City & State		6. Election Campaign Financing	\$5.00 May Be
23					Trust Fund Contribution	Added to Fees
Zip	Country	Z(p	Count	ry	8. This corporation owes or has paid the	
24	25	29	30		Personal Property Tax due June 30.	Yes No
	9. Name and Address of Curre	nt Registered Agent		-T-:	10. Name and Address of New Register	red Agent
SMITH, LANCE D 2781 WEST STATE ROAD 434				1 Name		
				82 Street Address (P.O. Box Number is Not Acceptable)		
LONGWOOD FL 32779						
			8	3		
			8	4 City		B5 Zip Code
					poration submits this statement for the purpos	-L .
office or r	egistered agent, or both, in the State in familiar with, and accept the oblig State in typed or printed name of registered in	e of Florida Such change was gations of, Section 607.0505, F	authorized Florida Statut	by the corpora es.	ation's board of directors. I hereby accept the	appointment as registered
12.	OFFICERS AN	ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 12
TITLE	P	DELE te	1.1 TITL	[]		Change Addition
NAME	WATKINS, PAUL B		1.2 NAM	E		
STREET ADDRESS	1604 HANGAR RD #333		1.3 STAL	ET ADDRESS		
CITY-ST-ZIP	\$ ANFORD FL		14 City	-ST-ZIP		
TITLE		DELETE	2 1 THTL	E		Change Addition
NAME			2.2 NAM	E		
STREET ADDRESS			2.3 STRE	ET ADDRESS	•	
CITY-ST-ZIP			2. 4 CITY	/-ST-ZIP		
TITLE		☐ DEL ET E	3.1 TITU	E		Change Addition
NAME			3.2 NAM	E		
STREET ADDRESS			3.3 STR	EET ADDRESS		
CITY-ST-2IP			3.4 CITY	r-ST-ZIP		
TITLE		DELETE	4.1 7111	1		Change Addition
NAME			4. 2 NAN	AE		
STREET ADDRESS			4.3 STR	EET ADDRESS		
CITY-ST-ZIP			4.4 CITY	-ST-ZIP		
TITLE		DELETE	5.1 TITL	E T		Change Addition
NAME			5.2 NAM	ne		
STREET ADDRESS			5.3 STR	EET ADDRESS		
CITY-ST-ZIP			5.4 CITY	'-ST-ZIP		
TITLE		☐ DELETE	6.1 TITL			Change Addition
NAME	, in the second		6 2 NAM	IE		
STREET ADDRESS	``		6 3 STRI	EET ADDRESS		
CITY-ST-ZIP			6.4 CITY	'-ST-ZIP		
,	I					

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutos. I further certify that the information indicated on this annual report or supplied 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.