

FILED

Apr 21, 2005 08:00 AM
Secretary of State**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # P97000019452 1. Entity Name SOUTHEAST JET LEASING, INC.	
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Principal Place of Business 2601 S.W. 14TH COURT DEERFIELD BEACH, FL 33442	Mailing Address 2601 S.W. 14TH COURT DEERFIELD BEACH, FL 33442
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04082005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0733864	Applied For Not Applicable
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5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent ST. JOHN, GREGORY 2601 S. BAYSHORE DRIVE SUITE 1600 MIAMI, FL 33133

**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.

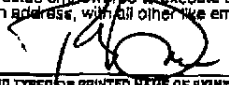
SIGNATURE _____ (NOTE: Registered Agent signature required when reappointing) _____ DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00**9. Election Campaign Financing
Trust Fund Contribution. ☐ \$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P BAUR, THOMAS E 2601 SW 14TH CT DEERFIELD BCH, FL 33442
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP CHASE, C G 8491 NW 17TH ST #101 MIAMI, FL 33126
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S ADORNO, HENRY 2601 S BAYSHORE DR #1600 MIAMI, FL 33133
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T JOHNS, STEVEN L 8941 NW 17TH ST #101 MIAMI, FL 33126
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

U00000321227
04/21/05-80070-022 150.00**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 19 07(3)(f), 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 this 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 DIRECTORAPR 08 2005 (931) 772-2058
Date Daytime Phone #