FILED

2001, UNIFORM BUSINESS REPORT (UBR)

Apr 23, 2001 8:00 am Secretary of State DOCUMENT # P97000025190 JET LIFT INTERNATIONAL, INC. 4-23-2001 90214 037 ***150.00 Principal Place of Business Mailing Address 100 JETT AIRE COURT 100 JETT AIRE COURT STE 3 STE 3 SANFORD FL 32773 SANFORD FL 32773 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE OO STARPORT WAY STE3 OO STARPORT WAY STE3 City & State City & State 4. FEI Number Applied For 59-3447157 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent LEE, RANDALL J Street Address (P.O. Box Number is Not Acceptable) 100 JETT AIRE COURT STE 3 100 STARPORT WAY STE 3 SANFORD FL 32773 Zip Code 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 FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 12 ☐ Delete TITLE ☐ Change Addition TITLE LEE, RANDALL J NAME NAME 144 TERIWOOD CT STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP FERN PARK FL 32730 ☐ Change ☐ Addition Delete TITLE TITLE LEE, RICHARD NAME NAME 395 TAYLOR BLVD, SUITE 100 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-71P PLEASANT HILL CA 94523 ☐ Change TITLE ☐ Addition TITLE ☐ Delete LEE, MARIE L NAME NAME. STREET ADDRESS 144 TERIWOOD CT STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP FERN PARK FL 32730 TITLE ☐ Change ☐ Addition TITLE ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP TITLE Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

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:

RANDALL T. LEF. 4-16-0/ 107-3-38-915/