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

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # **P97000042685**1. Corporation Name

MED-JET, INC.

Principal Place of Business	Mailing Addr
	450 000 00

FILED Feb 27, 1999 8:00 am Secretary of State

02-27-1999 90039 018 ***150.00



100 2ND AVE S. SUITE 704 ST PETERSBURG FL 33701		100 2ND AVE S. SUITE 704 ST PETERSBURG FL 33701			DO NOT WRITE IN THIS SPACE	
÷					3. Date incorporated or Qualifed 05/08/1997	
2. Principal Pl	ace of Business	2a. Mailing Address			4. FEI Number Applied For	
21		26			59-3444699 Not Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired \$8.75 Additional	
22		27			5. Certificate of Status Desired Fee Required	
City & State	3	City & State			6. Election Campaign Financing \$5.00 May Be	
23		28			Trust Fund Contribution Added to Fees	
Zip	Country	Zip	Country		This corporation owes the current year Intangible	
24	25	29 30	<u> </u>		Personal Property Tax. Yes No	
	9. Name and Address of Curren	t Registered Agent			10. Name and Address of New Registered Agent	
OIDE	O B ODAY		81	Name		
	S, B. GRAY		82	Street	Address (P.O. Box Number is Not Acceptable)	
	2ND AVE S, SUITE 704					
SIP	ETERSBURG FL 33701		83			
			84	City	85 Zip Code	
					d corporation submits this statement for the purpose of changing its registered	
agent. I as	n familiar with, and accept the obligat	tions of, Section 607.0505, Florida	a Statutes	•	poration's board of directors. I hereby accept the appointment as registered required when reinstating) DATE	
12.	OFFICERS AN		13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P	☐ OELETE	1.1 TITLE		P Change Addition	
NAME	BELLEW, DELANO		12 NAME		EDWARDS, WILLIAM	
STREET ADDRESS	1540 GULF BLVD.		1.3 STREET	ADDRESS	1	
CITY-ST-ZIP	CLEARWATER FL 34630		1.4 CITY-S	T-ZIP	ST. PETERSBURG, FL 33710	
TITLE	ST	☐ DELETE	2.1 TITLE		VP ¬☑ Change □ Addition	
NAME	GIBBS, B. GRAY		2.2 NAME		BELLEW, DELANO	
STREET ADDRESS	100 2ND AVE S, SUITE 704			TADDRESS		
	ST PETERSBURG FL 33701		2.4 CITY-5		CLEARWATER, FL 34630	
CITY-ST-ZIP TITLE	31 TETERODORO TE 33701	☐ DELETE	3.1 TITLE) I - ZIF	Change Addition	
ł			3.2 NAME			
NAME			3.3 STREET	LADORESS		
STREET ADDRESS			3.4. CITY-S			
CITY-ST-ZIP TITLE		☐ DELETE	4.1 TITLE	11-21	☐ Change ☐ Addition	
			4. 2 NAME			
NAME				T ADDRESS		
STREET ADDRESS			4.4 CITY-S			
TITLE		☐ DELETE	5.1 TITLE	1 - 211	☐ Change ☐ Addition	
NAME			5.2 NAME		· · · · · · · · · · · · · · · · · · ·	
1		i	5.3 STREET	ADDRESS		
STREET ADDRESS			5.4 CITY-S			
CITY-ST-ZIP TITLE		☐ OELETE	6.1 TITLE		☐ Change ☐ Addition	
			6.2 NAME			
NAME			6.3 STREE	ADDRESS		
STREET ADDRESS			6.4 CITY-S			

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 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, with all other like empowered.

SIGNATURE:

SIGNING OFFICER OR DIRECTOR