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 #

P97000054164 (3)

JET TYPE, INC.

FILED Feb 06 1998 8:00am Secretary of State



| Principal Place of Business Mailing Address | | | | 4 raditadi 310 latir idati aftili attili datir attili attal arrii differ bible attit arst retr | |
|--|--|-------------------------------------|--------------|--|---|
| 1995 W COMMERCIAL BLVD. SUITE C 1995 W COMMERCIAL BLVD. SUITE C | | | | | |
| FT LAUDERDALE FL 33309 FT LAUDERDALE FL 33309 | | | | | DO NOT WRITE IN THIS SPACE |
| | | | | | 3. Date Incorporated or Qualified |
| | | | | | 06/19/1997 |
| 2. Principal Pl | ace of Business | 2a. Mailing Address | | | A ECI Number |
| 21 | | 26 | | | 65-0764223 Not Applicable |
| Suite, Apt. #, etc. | | Suite, Apt. #, etc. | | | SR 75 Additional |
| 22 27 | | 27 |] | | 5. Certificate of Status Desired Fee Required |
| City & State | City & State | | | 6. Election Campaign Financing \$5.00 May Be | |
| 23 | 28 | | , <u> </u> | | Trust Fund Contribution Added to Fees |
| — Zip | Country | Zipi | Count | ry | 8. This corporation owes or has paid the current year Intangible |
| 24 | 25 29 30 | | | | Personal Property Tax due June 30. Yes No |
| 9. Name and Address of Current Registered Agent NOCH INSCHI | | | | | 10. Name and Address of New Registered Agent |
| NOFIL, JOSEPH K | | | ١ | Name | |
| 3284 N STATE RD 7 | | | 8: | 2 Street A | Address (P.O. Box Number is Not Acceptable) |
| LAUDERDALE LAKES FL 33319 | | | 8: | | |
| | | | 6 | 3 | |
| | | | 8 | 4 City | 85 Zip Code |
| 44 Ourseant | the manifolding of Castiana CO7 Of | 22 and 007 1500 Florida Ctatut | in the abo | | FL 83 2.10 COOL |
| office or re | egistered agent, or both, in the State | e of Florida. Such change was a | uthorized t | by the corpo | corporation submits this statement for the purpose of changing its registered oration's board of directors. I hereby accept the appointment as registered |
| agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. | | | | | |
| SIGNATURE Signature, typod or printed name of registered agend and title if applicable (NOT) Registered Agent squature required when reinstating) DATE | | | | | |
| 12. | | ID DIRECTORS | 13. | Som Signature To | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 |
| TITLE | PSTD | DELETE | 1.1 TITLE | | Change Addition |
| NAME | NOFIL, JAMES K | | 1.2 NAME | : | |
| STREET ADDRESS 1995 W COMMERCIAL BLVD, SUITE C | | | 1.3 STREI | FI ADDRESS | |
| CITY-ST-ZIP | FT LAUDERDALE FL 33309 | | 1.4 CITY- | | |
| TITLE | VD □ DELETE 2. | | 2.1 Tille | | Change Addition |
| NAME | KRAUSS, ROBERT | | 2.2 NAME | . | |
| STREET ADDRESS | | | 2.3 STREE | FT ADDRESS | <u>.</u> |
| CITY-ST-ZIP | FT LAUDERDALE FL 33309 | | 2. 4 CITY | - ST- ZIP | |
| TITLE | DELETE | | 3.1 TITLE | | ☐ Change ☐ Addition |
| NAME | | | 3.2 NAME | : | |
| STREET ADDRESS | | | 3.3 STREE | ET ADDRESS | |
| CITY-ST-ZIP | | | 3.4. CITY | | |
| TITLE | ☐ DELETE | | 4.1 11TLE | | Change Addition |
| NAME | | | 4. 2 NAMI | E | |
| STREET ADDRESS | | | 4.3 \$1REE | ET ADDRESS | |
| CITY-ST-ZIP | | T DELET | 4.4 CITY- | ST - ZIP | |
| TITLE | I | | 5.1 TITLE | | Change Addition |
| NAME | | | 5.2 NAME | - 1 | ļ |
| STREET ADDRESS | | | 5 3 STREE | T ADDRESS | |
| CITY-ST-ZIP | | T DELETE | 5.4 CITY- | \$1-7IP | To [7] 1222 |
| TITLE | | ☐ DELETE | 61 1ITLF | | Change Addition |
| NAME | | | 6.2 NAME | | |
| STREET ADDRESS | | | | 1 ADDRESS | |
| CITY-ST-ZIP | artifu that the information countied a | ith this filing does not quatify to | 6.4 CHY- | | d in Section 119 07/9/ii) Florida Statutos 1 further partifu that the information |
| indicated o | on this annual report or supplement | al annual report is true and acc | urate and ti | hat my sign | d in Section 119.07(3)(i), Florida Statutes. I further certify that the information hature shall have the same legal offect 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. | | | | | |