

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

FILED  
Mar 23 1998 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **P97000057584 (9)**

1. Corporation Name  
**EXECJET CHARTER, INC.**



Principal Place of Business <b>5500 N.W. 21ST TERRACE HANGER #18 FT LAUDERDALE FL 33309</b>	Mailing Address <b>5500 N.W. 21ST TERRACE HANGER #18 FT LAUDERDALE FL 33309</b>
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified <b>07/01/1997</b>	
21 Suite, Apt. #, etc.	25	26 Suite, Apt. #, etc.	29	4. FEI Number <b>65-0799884</b>	Applied For <input type="checkbox"/> Not Applicable
22 City & State	26	27 City & State	29	5. Certificate of Status Desired <input checked="" type="checkbox"/>	<b>\$8.75 Additional Fee Required</b>
23 Zip	25 Country	28 Zip	30 Country	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	<b>\$5.00 May Be Added to Fees</b>
				8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent <b>MACINNES, DONALD A C/O MORSE OPERATIONS, INC. 6363 NW 6TH WAY, SUITE 400 FT LAUDERDALE FL 33309</b>		10. Name and Address of New Registered Agent	
		81 Name	
		82 Street Address (P.O. Box Number is Not Acceptable)	
		83	
		84 City	85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation'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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1.1 TITLE	
NAME	MORSE, EDWARD J JR	1.2 NAME	
STREET ADDRESS	5500 N.W. 21ST TERRACE	1.3 STREET ADDRESS	
CITY-ST-ZIP	FT LAUDERDALE FL 33309	1.4 CITY-ST-ZIP	
TITLE	SVTD	2.1 TITLE	
NAME	MACINNES, DONALD A	2.2 NAME	
STREET ADDRESS	5500 N.W. 21ST TERRACE	2.3 STREET ADDRESS	
CITY-ST-ZIP	FT LAUDERDALE FL 33309	2.4 CITY-ST-ZIP	
TITLE	VD	3.1 TITLE	
NAME	BEAVER, RICHARD L	3.2 NAME	
STREET ADDRESS	5500 N.W. 21ST TERRACE	3.3 STREET ADDRESS	
CITY-ST-ZIP	FT LAUDERDALE FL 33309	3.4 CITY-ST-ZIP	
TITLE	VD	4.1 TITLE	
NAME	LOVEJOY, WILLIAM	4.2 NAME	
STREET ADDRESS	5500 N.W. 21ST TERRACE	4.3 STREET ADDRESS	
CITY-ST-ZIP	FT LAUDERDALE FL 33309	4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

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.

SIGNATURE:  March 13, 1998 954-351-0055  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone # 0279150

CR2E034 (10/97)