## SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998. AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P97000105692 (2)

JET FLEET INTERNATIONAL, INC.

Principal Place of Business 221 NW 35TH CT. Mailing Address

## FILED Oct 07 1998 8:00am Secretary of State



221 NW 35TH CT. FT. LAUDERDALE FL 33309		221 NW 35TH CT. FT. LAUDERDALE FL 33309			
<u> </u>				DO NOT WRITE IN THIS  3. Date Incorporated or Qualified	<b>S</b> PACE
				12/15/1997	
2. Principal P	lace of Business	2a. Mailing Address77	~ /	4. FEI Number	Applied For
21 22/	UW 35" (aut	26 27/ NW 35'	Court	65-08/9337	Not Applicable
Suite, Apt.	#, etc.	Sulte, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
22		27		3. Certificate of Status Desired	Fee Required
City & Stat	ruderdole, FL	City & State 28 ft. Landon	<del></del>	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
24 333	09 25 U.S	4 - 1 - 4	Country	This corporation owes or has paid the cur     Personal Property Tax due June 30.	Yes No
9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent					
LETCHWORTH, LANCE S					
221 NW 35TH CT.			82 Street A	Address (P.O. Box Number is Not Acceptable)	
FT. LAUDERDALE FL 33309			83		
			83		İ
			84 City	<b>F</b> 1	85 Zip Code
44 5	007.0500			FL	
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	Signature, typed or printed name of registered agent a	nd little Mappingable. (NOTE	Registered Agent signature	required when reinstating) DATE	# 10
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS AN	ID DIRECTORS IN 12
TITLE	D	DELETE	1.1 TITLE		Change Addition
NAME	LETCHWORTH, LANCE S		1.2 NAME		
STREET ADDRESS	221 NW 35TH CT.		1.3 STREET ADDRESS		
CłTY-ST-ZIP	FT. LAUDERDALE FL 33309		1.4 CITY-ST-ZIP		·
TITLE	-	DELETE	2.1 TITLE		Change Addition
NAME			2.2 NAME		
STREET ADDRESS	·		2.3 STREET ADDRESS		
CITY-ST-ZIP			2.4 CITY-ST-ZIP		
TITLE		DELETE	3.1 TITLE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-SY-ZIP			3.4 CITY-ST-ZIP		
TITLE		L DELETE	4.1 TITLE		Change Addition
NAME			4.2 NAME		,
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST-ZIP		<u> </u>
TITLE		L_J DELETE	5.1 TITLE	i	Change Addition
NAME PTOTET ADDDESS			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP TITLE		<u> </u>	5.4 CITY-ST-ZIP		
		☐ DELETE	6.1 TITLE		Change Addition
NAME STREET ADDRESS			6.2 NAME		
			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.

SIGNIFICATION

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and on our