

**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # P98000009862

1. Entity Name
LEADER JET INTERNATIONAL AIRLINES, INC.



Principal Place of Business
3409-B NW 72 AVE
MIAMI, FL 33122

Mailing Address
P.O. BOX 524407
MIAMI, FL 33152

FILED
05 JUN 30 AM 8:38
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



06232005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-0807346

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

HOFFMANN, TEODORO
3409-B NW 72 AVE
MIAMI, FL 33122

**DO NOT WRITE
IN THIS SPACE**

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. I am familiar with, and accept the obligations of registered agent.

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
Due by September 7, 2005**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

In accordance with s. 607.193(2)(b), F.S., the
corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE PD
NAME HOFFMANN, TEODORO
STREET ADDRESS 3409B NW 72 AVE
CITY-ST-ZIP MIAMI, FL 33122

TITLE ST
NAME BELISARIO, NEUMAN
STREET ADDRESS 3409B NW 72 AVE
CITY-ST-ZIP MIAMI, FL 33122

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

400056780874
06/30/05--01022--009 **150.00

**DO NOT WRITE
IN THIS SPACE**

12. 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 10 or Block 11 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

President

6/23/05

Date

305-5947858

Daytime Phone #