## 2003 FOR PROFIT CORPORATION

UNIFORM BUSINESS REPORT (UBR)					FILED
DOCUMENT # P98000023604  1. Entity Name COMJET INTERNATIONAL INC.					03 SEP 25 AM 8: 44
6555 N. POW SUITE 202	ce of Business FERLINE ROAD RDALE FL 33309	Mailing Address 6555 N. POWERLINE ROAD SUITE 202 FORT LAUDERDALE FL 33309		We The	SECRETARY OF STATE TALLAHASSEE. FLORIDA
2. Principal I	Place of Business  NW 134h AVE	3. Mailing Address			
Suite, Apt.	e 305	Suite, Apt. #, etc.			CHECK HERE IF MAKING CHANGES
City & Star	AND. FL.	City & State			4. FEI Number 65-0817937 Applied For Not Applicable
<i>3330</i>	19 USA	Zip	Country		5. Certificate of Status Desired
	_6. Name and Address of Current i	Registered Agent	Name		7. Name and Address of New Registered Agent
DAVIDSON, PETE		Street Address (		Apricinas (F	(PO. B. Mymper is Not Acceptable) Suite 425
2710 N.W. 88TH TERRACE CORAL SPRINGS FL 33065				. مرمب	TIMOMORA CIT, SAIR 105
·		City ///		17.	Ami FL 199134
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. (MOTE: Registered Agent signature required when reinstating)  DATE					
FILE NOW!!! FEE IS \$550.00 After September 10, 2003 Fee will be \$750.00 Make Check Payable to Florida Department of State				9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution.   Added to Fees	
10.	OFFICERS AND I		11.		DDITIONS CHANGES TO OFFICERS AND DIRECTORS IN 11
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P DAVIDSON, PETE 2710 N.W. 88TH TERRACE CORAL SPRINGS FL 33065	Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	56	Gesident Genage Addition Aurosal 12th Ave. #305 4.00 NW 12th Ave. #305 4. CNO. FC. 33309
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition <b>500023343605</b> 09/25/03—01090002 **150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
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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 of 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 a other like empowered.					

SIGNATURE:

September 23, 2003

Division of Corporations Uniform Business Report Filings P.O. Box 1500 Tallahassee, FL. 32302

Reference: Annual Filing Report

## To whom it may concern:

Due to circumstances beyond our control these reports are being filed past the required due date. A private individual that was handling our corporate bookkeeping and State & municipal filings had left town without notice, we could not contact anyone regarding the possession of our paperwork and documents. A storage company recently contacted us about storage files that were found after cleaning out the storage unit where the individual kept some of his belongings.

We kindly ask forgiveness for late filing fees due to the circumstances involved. In all honesty without the mail notices I would never think about the filing. I appreciate any consideration you may grant us.

Respectfully Sincerely,

Pete Davidson President