PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

1. Corporation Name

Principal Place of Business 7200 LAKE ELLENOR DR. STE 207 ORLANDO FL 32809 DO NOT WRITE IN THIS SPACE 3. Date incorporated or Qualifed O4/01/1998 2. Principal Place of Business 2a. Mailing Address 2b. Mailing Address 2c. Principal Place of Business 2a. Mailing Address 2b. Mailing Address 2c. Principal Place of Business 2d. Applied For Not Applicable 3c. Suite, Apt. #, etc. 3c.	JET WAY IRANS	SPORTATION, INC.								
ORLANDO FL 32809 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified O4/01/1998 4. FEI Number JOD 1/18 Not Applied For Suite, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc. City & State City & State City & State Zip Country Zip Country Zip Country B, This corporation owes the current year Intangible Personal Property Tax. Personal Property Tax. CORTELAZZO, CLAUDIO 7200 LAKE ELLENOR DR, STE 207 ORLANDO FL 32809 181 Name CORTELAZZO, CLAUDIO 7200 LAKE ELLENOR DR, STE 207 ORLANDO FL 32809 182 Street Address (P.O. Box Number is Not Acceptable) 19. Name and Address of Current Registered Agent 19. Name Address of New Registered Agent 19. Name Address of Ne	Principal Place of Busine	Mailing Address				f 1004(1004 tr4 1010) 18:tt	##III- ##III- ##III-			
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22 27 5. Certifcate of Status Desired Fee Required 22 City & State City & State City & State Election Campaign Financing \$5.00 May Be 23 Zip Country Zip Country 8. This corporation owes the current year Intangible 24 Z5 Z9 30 Personal Property Tax. Yes No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent CORTELAZZO, CLAUDIO 7200 LAKE ELLENOR DR, STE 207 0RLANDO FL 32809 84 City FL 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 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 and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE DATE			26			<u> </u>	1918			
City & State 28 City & State 28 City & State 28 Country Country Zip Country Zip Country Zip Country Signature, typed or printed name of registered agent and title if applicable. City & State City & State 6. Election Campaign Financing Trust Fund Contribution 8. This corporation owes the current year Intangible Personal Property Tax. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name CORTELAZZO, CLAUDIO 7200 LAKE ELLENOR DR, STE 207 ORLANDO FL 32809 82 Street Address (P.O. Box Number is Not Acceptable) 83 Signature, typed or printed name of registered agent and title if applicable. Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 11. Pursuant to the provisions of Sections 607.050 In 12. OFFICERS AND DIRECTORS IN 12.	_ ' ' '	<u> </u>	Suite, Apt. #, etc.			a Contituents of Status Desired				
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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 supplied will this ming does not qualify for the exemption stated in Section 1.13.07(5)(f), holido Statutes. Indirect certify that the mindicated on this 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, with all other like empowered.

SIGNATURE:区

Apr 20, 1999 8:00 am Secretary of State

04-20-1999 90016 010 ***150.00

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