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2001 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Apr 09, 2001 8:00 am DOCUMENT # P98000078837 Secretary of State JETSTAR FINANCIAL, INC. 04-09-2001 90046 029 ***150.00 Principal Place of Business Mailing Address 4601 SHERIDAN STREET, STE. 505 4601 SHERIDAN STREET, STE. 505 HOLLYWOOD FL 33021 HOLLYWOOD FL 33021 CON43022 2. Principal Place of Business 3. Mailing Address <u> 1720 Harrison St. C6-W</u> 720 Harrison St. C6-W Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 94-3325043 Not Applicable Hollywood, FL 33020 Hollywood, FL 33020 Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name Mark F. Butler BUTLER, MARK F Street Address (P.O. Box Number is Not Acceptable) 4601 Sheridan St. #505 1720 Harrison Street Ste. 6C-W HOLLYWOOD FL 33021 ^CĦollywood 33020 8. The above named ontity submits this statement for the purpose 🌶 changing its registered office or registered agent, or both, in the State of Florida. MANU 26 2001 MARK F. BUTLER SIGNATURE Signature, typed or printed name of registered agent and title if applicable NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing **\$5.00** May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 11. ☐ Delete TITLE **DPVS** TITLE NAME NAMĘ GILMAN, STEVEN STREET ADDRESS STREET ADDRESS 4601 SHERIDAN STREET, STE. 505 1720 Harrison St. C6-W CITY-ST-ZIP CITY-ST-ZIP HOLLYWOOD FL 33021 Hollywood, FL 33020 TITLE TITLE ☐ Delete NAME NAME GILMAN, STEVEN STREET ADDRESS 1720 Harrison St. 6C-W STREET ADDRESS 4601 SHERIDAN STREET, STE. 505 CITY-ST-7IP CITY-ST-ZIP Hollywood, FL 33020 HOLLYWOOD FL 33021 ☐ Change Addition A ☐ Delete TITLE NAME³ NAME CONNELL, KATHIE STREET ADDRESS STREET ADDRESS 1720 Harrison St. C6-W CITY-ST-ZIP CITY-ST-ZIP Hollywood, FL. 33020 TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIF ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 13. I hereby certify that the information symplied 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 truster empowers to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if of the corporation or the receiver or trusted en changed, or on an attachment with an address other like empowered.