

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Jun 30, 2003 8:00 am
Secretary of State

06-30-2003 90068 025 ***150.00

DOCUMENT # **999000045071**

1. Entity Name

JetSource, Inc.



90140426

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

431 Pinesong Drive

Suite, Apt. #, etc.

3. Mailing Address

431 Pinesong Drive

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

Casselberry, FL

City & State

Casselberry, FL

4. FEI Number

59-3575321

Applied For

Not Applicable

Zip

32707

Country

**USA
Seminole**

Zip

32707

Country

**USA
Seminole**

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name **Judith L. Williams**

Street Address (P.O. Box Number is Not Acceptable)

431 Pinesong Drive

City **Casselberry**

FL

32707

**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

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**Judith L. Williams
431 Pinesong Drive
Casselberry, FL 32707**

TITLE
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CITY - ST - ZIP

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**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 on an attachment with an address, with all other I am empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

6/26/03

401-699-8024

CR2E034B (12/02)

Attachment #

90140426
P99000045071

June 27, 2003

Division of Corporations
P. O. Box 1500
Tallahassee, FL 32302-1500

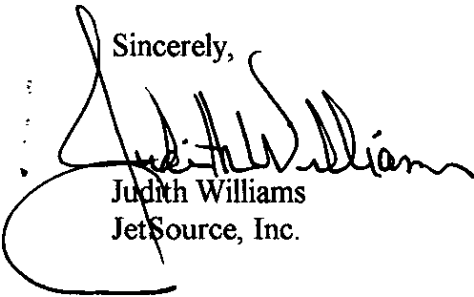
RE: Uniform Business Report --

Ladies and Gentlemen:

Enclosed please find my check number 1146 in the amount of \$150.00 for the annual fee for 2003. This payment was not made prior to May 1st as I did not receive the pre-printed form. Our neighborhood experienced mail fraud earlier in the year and I suspect it could have been taken from my mail box.

Please give me a call at 407-699-8024 if there is a problem with my payment.

Sincerely,



Judith Williams
JetSource, Inc.