

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

04 APR -7 AM 7:31

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P99000070081**

1. Corporation Name

JET TEAM INTERNATIONAL, INC.

900031837399
04/05/04--01056--015 **450.00

2. Principal Office Address

1925 SE AIRPORT RD

Suite, Apt. #, etc.

3. Mailing Office Address

1925 SE AIRPORT RD.

Suite, Apt. #, etc.

City & State

STUART FL

City & State

STUART FL

Zip

34996

Country

USA

Zip

34996

Country

USA

REINSTATEMENT 02-04

4. Date Incorporated or Qualified
To Do Business in Florida

-08/06/99-

5. FEI Number

650952708

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

MARK B. GOLDSTEIN, Esquire

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

2700 N MILITARY TRAIL SUITE 220 130

Suite, Apt. #, Etc.

City

BOCA RATON

State

FL

Zip Code

33431

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of
Registered Agent

Date **03/29/04**

REGISTERED AGENT MUST SIGN

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
P	JACK V. HETHERINGTON	1925 SE AIRPORT RD. HANGAR 2	STUART FL 34996

10. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE:

JACK V. HETHERINGTON

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

03/29/04

Date

772-781-5061

Daytime Phone #

CR2E081 (01/04)