1999

SUN JET AVIATION, INC.

1. Corporation Name

DOCUMENT # **V26343**



FLORIDA DEPARTMENT OF STATE

Secretary of State DIVISION OF CORPORATIONS

Katherine Harris

May 21, 1999 8:00 am Secretary of State

05-21-1999 90006 049 ***158.75



Principal Place of Business Mailing Address 1604 HANGAR RD 1604 HANGAR RD #333 #333 DO NOT WRITE IN THIS SPACE SANFORD FL 32773 SANFORD FL 32773 3. Date Incorporated or Qualifed 04/01/1992 2a. Mailing Address Applied For 4, FEI Number 2. Principal Place of Business Not Applicable 26 59-31218<u>19</u> 21 \$8.75 Additional Suite, Apt. #, etc. Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required 22 27 City & State \$5.00 May Be City & State Election Campaign Financing Trust Fund Contribution Added to Fees 23 28 Country 8. This corporation owes the current year Intangible Zip Zip Country **`**₩o 30 Personal Property Tax. 25 29 24 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 WATKINS, JAMES A Street Address (P.O. Box Number is Not Acceptable) 82 805 WELLSFORD WAY LAKE MARY FL 32746 Zip Code 84 City 85 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 office or 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 07.0505, Florida Statutes. SIGNATURE (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12. Addition ☐ DELETE 1.1 TITLE Change TITLE JAMES A. WAYK. N 1.2 NAME LEE, LISA M NAME 202 Monisford Man 1.3 STREET ADDRESS 3 MANTANZA RD STREET ADDRESS LAKE MARY, DI 32746 DEBARY FL 32713 1.4 CITY-ST-ZIP CITY-ST-ZIP ☐ Addition Change ☐ DELETE TITLE 2.1 TITLE LISA M. Lee WATKINS, JAMES A NAME 3 MANTANZA RE 2.3 STREET ADDRESS STREET ADDRESS **805 WELLSFORD WAY ぱ**おいる Debary 21 CITY-ST-ZIP LAKE MARY FL 2 4 City-ST-ZIP Addition ☐ DELETE ☐ Change 31 TITLE TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP ☐ Addition ☐ Change DELETE 4.1 TITLE TITLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP ☐ Change ___ Addition DELETE 5.1 TITLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP Addition 6.1 TITLE Change □ DELETE TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CITY-ST-ZIP

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 supplemental 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:

CITY-ST-ZIP

CR2E034 (11/98)