2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

Mar 29, 2004 8:00 am **Secretary of State** DOCUMENT # 842555 -1. Entity Name 03-29-2004 90063 007 ***150.00 SWISSPORT USA, INC. Principal Place of Business Mailing Address 45025 AVIATION DRIVE, SUITE 350 45025 AVIATION DRIVE, SUITE 350 **DULLES VA 20166 DULLES VA 20166** 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. Suite, Apt. #, etc. CR2E034 (11/03) City & State City & State 4. FEI Number Applied For 04-2485091 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent CORPORATION SERVICE COMPANY Street Address (P.O. Box Number is Not Acceptable) 1201 HAYS ST TALLAHASSEE FL 32301 City Zip Code 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 DATE (NOTE, Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. ☐ Addition TITLE TITLE □ Change Delete MILNER, LINDY NAME NAME STREET ADDRESS 45025 AVIATION DR STE 350 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **DULLES VA 20166** SD ☐ Change Addition TETLE ☐ Delete TITLE NAME OAKLEY, DAWN E NAME 45025 AVIATION DR STE 350 STREET ADDRESS STREET ADDRESS **DULLES VA 20166** CITY-ST-ZIP CITY-ST-7IP ☐ Change Addition Addition TITLE ☐ Delete TITLE NAME **BUHIMANN, ANDREAS** STREET ADDRESS 45025 AVIATION DRIVE STE 350 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **DULLES VA 20166** PD ☐ Change Addition TITLE ☐ Delete BDENMANN, ERICH NAME NAME STREET ADDRESS 45025 AVIATION DR STE 350 STREET ADDRESS DULLES VA 20166 CITY-ST-ZIP CITY-ST-ZIP ☐ Change Delete Addition TITLE TITLE DENNIS BERTELL! 45025 AVIATION DR., STE 350 BARON, LISA NAME NAME 45025 AVIATION DRIVE STE 350 STREET ADDRESS STREET ADDRESS VA 20166. DULLES VA 20166 DULLES. CITY-ST-ZIP CITY-ST-7IP VΡ **⊠** Delete ☐ Change Addition TITLE TITLE HOWARD FOWLER DR., STE 350 LANE, BILLY R NAME NAME

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 Block 11 if changed, or on an attachment with an address, with all other like empowered.

STREET ADDRESS

DULLES,

MILNER

CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CiTY-ST-7IP

45025 AVIATION DR STE 350

DULLES VA 20166

LINDY SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

VA 20166.

FILED