

**2024 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 838335

**Entity Name:** SKY CHEFS, INC.**Current Principal Place of Business:**5040 RIVERSIDE DR  
BUILDING 1 SUITE 200  
IRVING, TX 75039**Current Mailing Address:**5040 RIVERSIDE DR  
BUILDING 1 SUITE 200  
IRVING, TX 75039 US**FEI Number:** 13-1318367**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 US*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.***SIGNATURE:**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title DIRECTOR  
Name RAUER, ERDMANN  
Address 5040 RIVERSIDE DR  
BUILDING 1 SUITE 200  
City-State-Zip: IRVING TX 75039

Title PRESIDENT  
Name RUTJES, JOHN  
Address 5040 RIVERSIDE DR  
BUILDING 1 SUITE 200  
City-State-Zip: IRVING TX 75039

Title SENIOR VICE PRESIDENT  
Name DENNIS, DAVID  
Address 5040 RIVERSIDE DR  
BUILDING 1 SUITE 200  
City-State-Zip: IRVING TX 75039

Title SENIOR VICE PRESIDENT  
Name CRESSWELL, TONE  
Address 5040 RIVERSIDE DR  
BUILDING 1 SUITE 200  
City-State-Zip: IRVING TX 75039

Title SECRETARY  
Name HINDERLITER, DON  
Address 5040 RIVERSIDE DR  
BUILDING 1 SUITE 200  
City-State-Zip: IRVING TX 75039

Title ASSISTANT SECRETARY  
Name ARTERBERRY, MICHAEL  
Address 5040 RIVERSIDE DR  
BUILDING 1 SUITE 200  
City-State-Zip: IRVING TX 75039

Title ASSISTANT SECRETARY  
Name KENNON, JOEL  
Address 5040 RIVERSIDE DR  
BUILDING 1 SUITE 200  
City-State-Zip: IRVING TX 75039

Title HEAD OF ACCOUNTING, TAX AND  
TREASURY  
Name ARTERBERRY, MICHAEL  
Address 5040 RIVERSIDE DR  
BUILDING 1 SUITE 200  
City-State-Zip: IRVING TX 75039

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.*

**SIGNATURE:** DON HINDERLITER**SECRETARY****04/09/2024**

Electronic Signature of Signing Officer/Director Detail

Date