

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 838335

FILED  
Apr 19, 2011  
Secretary of State

Entity Name: SKY CHEFS, INC.

**Current Principal Place of Business:**

6191 N STATE HWY 161  
IRVING, TX 75038 US

**New Principal Place of Business:**

**Current Mailing Address:**

6191 N STATE HWY 161  
IRVING, TX 75038 US

**New Mailing Address:**

FEI Number: 13-1318367

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 US

**Name and Address of New Registered Agent:**

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

**OFFICERS AND DIRECTORS:**

Title: D  
Name: GEHL, WALTER  
Address: 6191 N STATE HWY 161  
City-St-Zip: IRVING, TX 75038

Title: AS  
Name: LEE, THOMAS J  
Address: 6191 N STATE HWY 161  
City-St-Zip: IRVING, TX 75038

Title: P  
Name: LEHMAN, SONDR  
Address: 6191 N. STATE HWY 161  
City-St-Zip: IRVING, TX 75038

Title: S  
Name: JANCO, HOWARD  
Address: 6191 N. STATE HWY 161  
City-St-Zip: IRVING, TX 75038

Title: SVP  
Name: LILLEY, JOHN  
Address: 6191 N. STATE HWY. 161  
City-St-Zip: IRVING, TX 75038

Title: AS  
Name: CAIN, KENT  
Address: 6191 N. STATE HWY. 161  
City-St-Zip: IRVING, TX 75038

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: HOWARD L. JANCO

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04/19/2011

Electronic Signature of Signing Officer or Director

Date