2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # F81559 1. Entity Name AIRBORNE BILLBOARDS, INC.



FILED Feb 26, 2007 08:00 AM Secretary of State

Principal Place of Business

800 THIRD AVENUE, 28TH FL NEW YORK, NY 10022 Mailing Address

800 THIRD AVENUE, 28TH FLOOR NEW YORK, NY 10022



DO NOT WRITE IN THIS SPACE 01122007

6.	FEI Number	Applied For	
	59-2577087	Not Applicat	ol

5. Certificate of Status Desired

No Chg-P

\$8.75 Additional Fee Required

CR2E034 (11/05)

6. Name and Address of Current Registered Agent

800 THIRD AVENUE, 28TH FLOOR

NEW YORK, NY 10022

NRAI SERVICES, INC. 2731 EXECUTIVE PARK DR, SUITE 4 WESTON, FL 33331

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				way to see an are the
	named entity submits this statement for the pations of registered agent.	urpose of changing its registere	ed office or registered agent, or bo	oth, in the State of Florida. I am familiar with, and accep
SIGNATURE.	Signature, typed or printed name of registered agent and title	f applicable (NOTE: Registered	d Agent signature required when reinstating)	DATE
	E NOW!!! FEE IS \$150.00 ay 1, 2007 Fee will be \$550.00	Election Campaign Finan Trust Fund Contribution.		U00000648481 03/07/07-80011-002 150.00
10.	OFFICERS AND DIREC	TORS	and the same of the same	Lare No.
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P BUTLER, JAMES 1600 EAST AIRPORT ROAD PEMBROKE PINES, FL 33023		The second se	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SVP PRETSFELDER, STEVEN 800 THIRD AVENUE, 28TH FLOOR NEW YORK, NY 10022			
TITLE NAME	T BEATTIE, WILLIAM C		i de la companya de l	

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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.

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STREET ADDRESS

CITY-ST-ZIP

TITLE

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SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/10/07

212-699-8400