## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F94000001437

Entity Name: SWISSPORT CARGO SERVICES, INC

45025 AVIATION DRIVE SUITE 350

() Delete

45025 AVIATION DRIVE SUITE 350

( ) Delete

DULLES, VA 201667557 US

DULLES, VA 201667557 US

BODENMANN, ERICH

Address

Title:

Title:

Name:

Address:

City-St-Zip:

City-St-Zip:

FILED Apr 23, 2007 Secretary of State

•		- · · · · - · · · · - · - · - · · · · ·					
Current Principal Place of Business:				New Principal Place of Business:			
45025 AVIATION DRIVE SUITE 350 DULLES, VA 201667557 US				45025 AVIATION DRIVE SUITE 350 DULLES, VA 201667557 US			
Current Mailing Address:				New Mailing Address:			
45025 AVIATION DRIVE SUITE 350 DULLES, VA 201667557 US				45025 AVIATION DRIVE SUITE 350 DULLES, VA 201667557 US			
FEI Number	: 68-0316648	FEI Number Applied For ( )	FEI Nur	nber Not Appl	icable ( )	Certificate of Status	Desired ( )
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:			
1201 HAYS TALLAHAS The above	S STREET SSEE, FL 323	CE COMPANY  01 US  submits this statement for the page 2.1	purpose o	of changing i	ts registered	office or registered a	agent, or both,
SIGNATU	RE:						
	Electron	nic Signature of Registered Ag	ent			Date	
Election Car	mpaign Financin	g Trust Fund Contribution ( ).					
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	BODENMANN,	N DRIVE SUITE 350		Title: Name: Address: City-St-Zip:	BODENMANN	ION DRIVE SUITE 350	
Title: Name: Address: City-St-Zip:	OAKLEY, DAW	N DRIVE SUITE 350		Title: Name: Address: City-St-Zip:	OAKLEY, DA	ION DRIVE SUITE 350	
Title: Name:	T ( MILNER, LIND	Delete		Title: Name:	T ( MILNER, LINI	(X) Change ( ) Addition	

Name: BERTSCH, LUDWIG Name: JANSEN, MICHEL
Address: SWISSPORT INT'L LTD BK Address: 45025 AVIATION DRIVE, SUITE 350
City-St-Zip: ZURICH SWITZERLAND CH-8058, City-St-Zip: DULLES, VA 20166

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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 an address, with all other like empowered.

Address:

Title:

Title:

Name:

Address:

City-St-Zip:

City-St-Zip:

SIGNATURE: LINDY MILNER T 04/23/2007

45025 AVIATION DRIVE SUITE 350

45025 AVIATION DRIVE SUITE 350

(X) Change ( ) Addition

(X) Change ( ) Addition

DULLES, VA 20166 US

BODENMANN, ERICH

DULLES, VA 20166 US