

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
May 07 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # F94000002160 (9)
 1. Corporation Name
STAFF AIRPORT SERVICES, INC.



Principal Place of Business P.O. BOX 12357 PITTSBURGH PA 15231	Mailing Address P.O. BOX 12357 PITTSBURGH PA 15231
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DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 04/26/1994		4. FEI Number 25-1418984		Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required		
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		\$5.00 May Be Added to Fees		
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30 <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				

9. Name and Address of Current Registered Agent CT CORPORATION SYSTEM 1200 S. PINE ISLAND RD. PLANTATION FL 33324		81 Name
		82 Street Address (P.O. Box Number is Not Acceptable)
		83
		84 City FL 85 Zip Code

10. Name and Address of New Registered Agent	
81 Name	
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City FL 85 Zip Code	

11. Pursuant to the provisions of Sections 607.0502 and 607.1508 Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ (NOTE: Registered Agent signature required when resigning) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	NAME	1.1 TITLE	1.2 NAME
	PVST O'LEARY, MARY M 141 MAYER DR. OAKDALE PA 15071	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
	DC O'LEARY, MARY M 141 MAYER DR. OAKDALE PA 15071	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
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14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Mary M O'Leary* **MARY M. O'LEARY, President 4/28/98 412-472-5151**

CR2E034 (10/97)