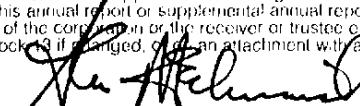


FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

FILED
Jul 02 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		 FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # F95000000097 1. Corporation Name COLUMBUS OPERATORS, INC.			
Principal Place of Business 2231 E. Camelback Road #400 Phoenix, AZ 85016		Mailing Address same	
2. Principal Place of Business 21 2231 E. Camelback Rd. Suite, Apt. #, etc. 22 Suite 400 City & State 23 Phoenix, Arizona Zip 24 85016		2a. Mailing Address 26 2231 E. Camelback Rd. Suite, Apt. #, etc. 27 Suite 400 City & State 28 Phoenix, Arizona Zip 29 85016 Country 30 USA	
3. Date Incorporated or Qualified 1/6/95		3a. Date of Last Report	
4. FEI Number 52-1253785		Applied For Not Applicable	
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution ☐		\$5.00 May Be Added to Fees	
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No			
9. Name and Address of Current Registered Agent CT Corporation System 1200 S. Pine Island Road Plantation, Florida 33324		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 Signature typed or printed name of registered agent and local applicable (NOTE: Registered Agent signature required when reinstating) DATE			
12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	President & Director ☐ DELETE	11 TITLE	☐ Change ☐ Addition
NAME	Eric A. Danziger	12 NAME	
STREET ADDRESS	2231 E. Camelback Rd. #400	13 STREET ADDRESS	
CITY-ST-ZIP	Phoenix, AZ 85016	14 CITY-ST-ZIP	
TITLE	Vice President & Director ☐ DELETE	21 TITLE	☐ Change ☐ Addition
NAME	Theodore W. Darnall	22 NAME	
STREET ADDRESS	2231 E. Camelback Rd. #400	23 STREET ADDRESS	
CITY-ST-ZIP	Phoenix, AZ 85016	24 CITY-ST-ZIP	
TITLE	Secretary Director ☐ DELETE	31 TITLE	☐ Change ☐ Addition
NAME	Nir E. Margalit	32 NAME	
STREET ADDRESS	2231 E. Camelback Rd. #400	33 STREET ADDRESS	
CITY-ST-ZIP	Phoenix, AZ 85016	34 CITY-ST-ZIP	
TITLE	Treasurer ☐ DELETE	41 TITLE	☐ Change ☐ Addition
NAME	Charles E. McCain	42 NAME	
STREET ADDRESS	2231 E. Camelback Rd. #400	43 STREET ADDRESS	
CITY-ST-ZIP	Phoenix, AZ 85016	44 CITY-ST-ZIP	
TITLE	Vice President ☐ DELETE	51 TITLE	☐ Change ☐ Addition
NAME	Alan Schnaid	52 NAME	
STREET ADDRESS	2231 E. Camelback Rd. #400	53 STREET ADDRESS	
CITY-ST-ZIP	Phoenix, AZ 85-16	54 CITY-ST-ZIP	
TITLE	☐ DELETE	61 TITLE	☐ Change ☐ Addition
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY-ST-ZIP		64 CITY-ST-ZIP	
14. I do 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 as an attachment with an address.			
SIGNATURE: 		6-18-97 (602) 852-3900	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date: Daylight Phone #	

CR2E034 (9/96)