FILED

2003 FOR PROFIT CORPORATION **UNIFORM BUSINESS REPORT (UBR)**

Apr 28, 2003 8:00 am Secretary of State F95000004288 DOCUMENT # 04-28-2003 91369 018 ***150.00 AIRBÁSE SERVICES, INC. Mailing Address 5480 VALMONT RD Principal Place of Business 7860 N.W. 67TH ST. MIAM! FL 33166 #300 BOULDER CO 80301 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. ☐ CHECK HERE IF MAKING CHANGES City & State City & State 4. FEI Number Applied For 33-0675153 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent C T CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324 City Zip Code 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2003 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS 10. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. CEOD ☐ Addition TITLE Change TITLE ☐ Delete MCKEOWN, TOM NAME NAME 7201 SPRING CREEK CIRCLE STREET ADDRESS STREET ADDRESS **BOULDER CO 80503** CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Change Addition TITLE TITLE AMES, LARRY NAME NAME STREET ADDRESS 6855 SPRINGHILL DRIVE STREET ADDRESS **NIWOT CO 80503** CITY~ST-ZIP CITY-ST-ZIP **CFOV** Delete -- - Change Addition TITLE TITLE METZGER, DAVID M NAME NAME 4760 KINCROSS COURT STREET ADDRESS STREET ADDRESS **BOULDER CO 90301** CITY-ST-ZIP CITY-ST-ZIP Change Addition TITLE ☐ Delete TITLE ANDERSON, LLOYD B NAME NAME 10319 N. 65TH STREET ADDRESS STREET ADDRESS LONGMONT CO 80503 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition MCKEOWN, RODNEY NAME NAME 239 EAST 6TH AVENUE STREET ADDRESS STREET ADDRESS VANCOUVER, BC V5T 1J7 CITY-ST-ZIP CITY-ST-ZIP ☐ Addition ☐ Delete FERGUSON, DAVID L NAME NAME

12. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), 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 **DEWIGHOLE.** IVIELEGE

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE:

VAIL CO 81657

STREET ADDRESS

CITY-ST-ZIP

CHAPURE REQUIRED SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

108 S FRONTAGE ROAD WEST, SUITE 307

4/9/03

303-545-9800