

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

FILED
Jul 16 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 # G32831
1. Corporation Name **AIRPORT GROUP NEW YORK, INC.**

Principal Place of Business Mailing Address
**330 N. Brand Blvd.
Suite 300
Glendale, CA 91203-2308**

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country	3. Date Incorporated or Qualified 04/12/83	4. FEI Number 14-1641956	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 owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☐ No		

9. Name and Address of Current Registered Agent

**CT Corporation
1200 S. Pine Island Road
Plantation, FL 33324**

10. Name and Address of New Registered Agent

81 Name	85 Zip Code
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	FL

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 of Registered Agent (typed or printed name of agent in Block 9 and Block 10)

(607.1508 Registered Agent Signature is required when registering)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DCP ☐ DELETE	1.1 TITLE	☐ Change ☐ Addition
NAME	Cowell, Patrick	1.2 NAME	
STREET ADDRESS	330 N. Brand Blvd. #300	1.3 STREET ADDRESS	
CITY-ST-ZIP	Glendale, CA 91203-2308	1.4 CITY-ST-ZIP	
TITLE	DVT ☐ DELETE	2.1 TITLE	☐ Change ☐ Addition
NAME	Snyder, Charles	2.2 NAME	
STREET ADDRESS	Same	2.3 STREET ADDRESS	
CITY-ST-ZIP		2.4 CITY-ST-ZIP	
TITLE	DVS ☐ DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME	Bishop, Anthony	3.2 NAME	
STREET ADDRESS	Same	3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	DV ☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME	Bullock, Robert	4.2 NAME	
STREET ADDRESS	Same	4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

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 simplified annual report is true and accurate and that my signature shall have the same legal effect as if made under oath. 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/6/98

(818) 409-7558

CR2E034 (10/97)