


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 20, 2006 08:00 AM
Secretary of State

DOCUMENT # P04000014436

1. Entity Name
AIRPORT PARKING INC.



Principal Place of Business Mailing Address

3020 S. FEDERAL HWY 3020 S. FEDERAL HWY
 FT. LAUDERDALE, FL 33316-4026 FT. LAUDERDALE, FL 33316-4026



01162006 No Chg-P CRZE034 (11/05)

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4. FEI Number
56-2430478 Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

LEGUILLON, AMADO
3020 S. FEDERAL HWY
FT. LAUDERDALE, FL 33316-4026

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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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

100000442491
 03/04/06-80021-004 150.00

10. OFFICERS AND DIRECTORS

| | |
|--|--|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | PO GREENBERG, JANICE H 3020 S. FEDERAL HWY FT. LAUDERDALE, FL 333164026 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | SD LEGUILLON, AMADO 3020 S. FEDERAL HWY FT. LAUDERDALE, FL 333164026 |
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 empowered.

SIGNATURE:  **Amado Leguillon** 1/16/2006 854-524-4810
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #