

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

FILED
Apr 17 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P15491** (4)
1. Corporation Name
OGDEN ALLIED BUILDING & AIRPORT SERVICES INC.



Principal Place of Business Mailing Address
%OGDEN ALLIED SERVICES CORPORATION
TWO PENNSYLVANIA PLAZA
NEW YORK NY 10121

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address	
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.
22	City & State	27	City & State
23	Zip	28	Country
24	Country	29	Zip
25	Country	30	Country

3. Date Incorporated or Qualified 08/06/1987	
4. FEI Number 13-5618372	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 type="checkbox"/> No	

9. Name and Address of Current Registered Agent

THE PRENTICE-HALL CORPORATION SYSTEM INC.
1201 HAYS STREET
SUITE 105
TALLAHASSEE FL 32301

10. Name and Address of New Registered Agent

81	Name
82	Street Address (P.O. Box Number is Not Acceptable)
83	
84	City
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 title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	VD	1.1 TITLE	VICE PRESIDENT/ ASST. SEC. <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PALMER, ISSAC	1.2 NAME	PALMER, ISSAC
STREET ADDRESS	2 PENNSYLVANIA PLAZA	1.3 STREET ADDRESS	TWO PENNSYLVANIA PLAZA
CITY-ST-ZIP	NY NY	1.4 CITY-ST-ZIP	NEW YORK NY
TITLE	PD	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ABLON, R. RICHARD	2.2 NAME	
STREET ADDRESS	TWO PENNSYLVANIA PLAZA	2.3 STREET ADDRESS	
CITY-ST-ZIP	NEW YORK NY	2.4 CITY-ST-ZIP	
TITLE	V	3.1 TITLE	VICE PRESIDENT/DIRECTOR <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ALLEN, PETER	3.2 NAME	ALLEN, PETER
STREET ADDRESS	TWO PENNSYLVANIA PLAZA	3.3 STREET ADDRESS	TWO PENNSYLVANIA PLAZA
CITY-ST-ZIP	NEW YORK NY	3.4 CITY-ST-ZIP	NEW YORK NY
TITLE	V	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BAUKNECHT, JOHN W.	4.2 NAME	
STREET ADDRESS	TWO PENNSYLVANIA PLAZA	4.3 STREET ADDRESS	
CITY-ST-ZIP	NEW YORK NY	4.4 CITY-ST-ZIP	
TITLE	AS	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	EFFINGER, J. L.	5.2 NAME	
STREET ADDRESS	TWO PENNSYLVANIA PLAZA	5.3 STREET ADDRESS	
CITY-ST-ZIP	NEW YORK NY	5.4 CITY-ST-ZIP	
TITLE	VT	6.1 TITLE	VICE PRESIDENT/TREASURER/ <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DIGIA, ROBERT M.	6.2 NAME	DIRECTOR
STREET ADDRESS	TWO PENNSYLVANIA PLAZA	6.3 STREET ADDRESS	DIGIA, ROBERT M.
CITY-ST-ZIP	NEW YORK NY	6.4 CITY-ST-ZIP	TWO PENNSYLVANIA PLAZA

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.

FORM APPROVED

VICE PRESIDENT

4 / 2 / 98

(212) 868-4331

CR2E034 (10/97)