FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT
1996

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

DOCUMENT # P23313 (0)

1. Corporation Name

AIR LINK (U.S.A.) INC.

Principal Place of Business	Mailing Address
248-06 ROCKAWAY BLVD. JAMAICA NY 11422	248-06 ROCKAWAY BLVD. JAMAICA NY 11422

3. Date Incorporated or Qualified: 03/08/1989
3a. Date of Last Report: 03/15/1995
4. FEI Number: 11-2999060 ☐ Applied For ☐ Not Applicable

2. Principal Place of Business
21 ____
Suite, Apt. #, etc.
22 ____
City & State
23 ____
Zip 24 ____ Country 25 ____

2a. Mailing Address
26 ____
Suite, Apt. #, etc.
27 ____
City & State
28 ____
Zip 29 ____ Country 30 ____

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 FL 33324

10. Name and Address of New Registered [redacted]
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 ____ DATE ____

12. OFFICERS AND DIRECTORS

TITLE	M	☑ DELETE
NAME	RAY, SUNAN DAN	
STREET ADDRESS	248-06 ROCKAWAY BLVD.	
CITY-ST-ZIP	NEW YORK NY	
TITLE	S	☐ DELETE
NAME	NELSON, CARLA	
STREET ADDRESS	1240 OLD BAYSHORE BLVD.	
CITY-ST-ZIP	BURLINGAME CA	
TITLE	D	☐ DELETE
NAME	ASH, DOUGLAS T	
STREET ADDRESS	CORY HOUSE, THE RING	
CITY-ST-ZIP	BRACKNEL, ENGLAND	
TITLE	D	☑ DELETE
NAME	TSUI, THOMAS	
STREET ADDRESS	23 BAILEY STREET	
CITY-ST-ZIP	KOWLOON, HONG KONG	
TITLE	D	☐ DELETE
NAME	HOPE, EDWARD C	
STREET ADDRESS	CORY HOUSE, THE RING	
CITY-ST-ZIP	BRACKNEL, ENGLAND	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	PRESIDENT	☐ Change ☑ Addition
1.2 NAME	GEOFF CORPE	
1.3 STREET ADDRESS	HATTON CROSS, FELTHAM	
1.4 CITY-ST-ZIP	MIDDLESEX, TW14 0PL United Kingdom	
2.1 TITLE		☐ Change ☐ Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		
3.1 TITLE		☐ Change ☐ Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		☐ Change ☐ Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		☐ Change ☐ Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		☐ Change ☐ Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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.

SIGNATURE: CARLA NELSON 2/7/96 (718)949-2888
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E034 (12/95)