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

PROFIT CORPORATION **ANNUAL REPORT**

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

(6)

GLOBE AIRPORT SECURITY SERVICES, INC.

FILED									
May 28 1998 8:00am									
Secretary of State									



Principal Place of Business Mailing Address								1811 EIS14 ALB11 A1911	41411 41511 1991	
800 W AIRPO	RT FREEWAY			PORATION TRU	IST CO					
STE 911 DALLAS TX 75062 US			200 S. MICHIGAN AVE.				DO NOT WRITE IN	DO NOT WRITE IN THIS SOLOE		
			CHICAGO IL 60804				3. Date Incorporated or Qualified	DO NOT WRITE IN THIS SPACE		
							08/21/1990			
	lace of Busmoss		2a. Mailing Ad	idress			4. FEI Number		Applied For	
21			26				22-3059211	Not Applicable		
Suite, Apt. #, etc.			Suite, Apt #, etc.				5. Certificate of Status Desired	\$8.75 Additional Fee Required		
City & State			City & State				6. Election Campaign Financing	\$5.	00 May Be	
23			28				Trust Fund Contribution			
Zip Country			Zip Country				8. This corporation owes or has paid the current year Intangible			
24	25 29 30			0	Personal Property Tax due June 30. Yes No					
		manager and analysis of the second	t Registered Ager	nl			10. Name and Address of New Regis	stered Agent		
	CORPORATION				81	Name				
	XX S. PINE ISLAN			82	Street A	ddress (P.O. Box Number is Not Acceptable))			
PLANTATION FL 33324					83		, , , , , , , , , , , , , , , , , , ,			
					84	City	,	FL 85 Z	Zip Code	
44.5		0-1	0 1002 1100 5	and the Charles						
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Stalutes, 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 proted name of registered agent and title diapplicable (NOTE, Beg						n: signature n		DATE		
12.	В	OFFICERS ANI		DELETE	13.	<u>.</u>	ADDITIONS/CHANGES TO OFFICER	RS AND DIRECT		
TITLE	HARPER, RON	ו מואו	L	QUULI		ŀ		Onder	ge La roution	
STREET ADDRESS 4121 OXLEA DR.				1.2 NAME						
DI ANO TE			1.3 STREFT ADDRESS 1.4 CITY-ST-ZIP			- 1				
CITY-ST-ZIP TITLE	AS			DELETE	2.1 TITLE	1-211		Chan	ge Addition	
NAME	BLIGH, DIANA	w	-	OLC IL	2.2 NAME					
STREET ADDRESS	200 S. MICHIC				2.3 STRÉET	ADOBESS			}	
CITY+ST-ZIP	CHICAGO IL				2. 4 CITY-5					
TITLE	, , , , , , , , , , , , , , , , , , ,			DELETE	3.1 TITLE	11-211		Chan	ge Addition	
NAME	WOOD, TIMOT	тнү м			3.2 NAME			_		
STREET ADDRESS	200 SO MICH				3.3 STREET	ADDRESS				
City-St-ZiP	CHICAGO IL	· -			3.4. CITY - 9				ļ	
TITLE	1			DELETE	4.1 TITLE			Chan	ge Addition	
NAME	COOPER, BRI	AN S			4. 2 NAME				1	
STREET ADDRESS	200 S MICHIG				4.3 STREET	ADDRESS			1	
CITY-ST-ZIP	CHICAGO IL				4.4 CITY - S	[
TITLE	D			DELETE	5.1 TITLE			☐ Chan	ge Addition	
NAME	O'BRIEN, JOH	IN D			5.2 NAME	ļ				
STREET ADDRESS	200 S MICHIG	AN AVE			5.3 STREET	ADDRESS				
CITY-ST-ZIP	CHICAGO IL				5.4 CITY-S					
TITLE	-			DELETE	6.1 TITLE			☐ Chan	ge Addition	
NAME					6.2 NAME	- 1				
STREET ADDRESS					6.3 STREET	ADDRESS				
CITY-\$1-ZIP	'				6.4 CITY-S	- 1				

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 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 trusted 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.