

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00 ²⁰⁰ _{CLY}

CORPORATION ANNUAL REPORT 1995
 FLORIDA DEPARTMENT OF STATE
 Sandra B. Mortham
 Secretary of State
 DIVISION OF CORPORATIONS



DOCUMENT # P38513 (8)
 1. Corporation Name
 BIRDAIR, INC.

Principal Place of Business Mailing Address
 65 LAWRENCE BELL DRIVE AMHERST NY 14221
 65 LAWRENCE BELL DRIVE AMHERST NY 14221

FILED
 95 JAN 23 AM 10:07
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

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

DO NOT WRITE IN THIS SPACE.
 3. Date Incorporated or Qualified 3a. Date of Last Report
 04/27/1992 05/01/1994
 4. FEI Number Applied For
 16-124447 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 has liability for intangible tax under S. 199.032, Florida Statutes Yes No

9. Name and Address of Current Registered Agent
 C T CORPORATION SYSTEM
 1200 SOUTH PINE ISLAND ROAD
 PLANTATION FL 33324

10. Name and Address of New Registered Agent
 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 _____
Signature typed or printed name of registered agent and the corporation Registered Agent signature required when installing

12. OFFICERS AND DIRECTORS	
TITLE	PD
NAME	NEWMAN, JAMES L. JR.
STREET ADDRESS	65 LAWRENCE BELL DR
CITY- ST- ZIP	AMHERST NY
TITLE	VST
NAME	DUNCAN, JON
STREET ADDRESS	65 LAWRENCE BELL DR
CITY- ST- ZIP	AMHERST NY
TITLE	D
NAME	EVERETT, WILLIAM
STREET ADDRESS	701 DANIEL WEBSTER HWY.
CITY- ST- ZIP	MERRIMACK NH
TITLE	D
NAME	TOSHIKTSU, SHIMIZU
STREET ADDRESS	4-8-4 KIGAWA-HIGASHI
CITY- ST- ZIP	OSKA JA
TITLE	D
NAME	KUME, YASUO
STREET ADDRESS	3-22-1 HIGASHIYAMA
CITY- ST- ZIP	TOKYO JA
TITLE	D
NAME	NOMURA, MOTONOBU
STREET ADDRESS	3-22-1 HIGASHIYAMA
CITY- ST- ZIP	TOKYO, JAPAN

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY- ST- ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY- ST- ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY- ST- ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY- ST- ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY- ST- ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY- ST- ZIP	

14. I do hereby certify that the information set forth with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.073(1)(k), Florida Statutes. I further certify that the information included in 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, as applicable, or on an attachment with an address.

SIGNATURE: J. James Newman, President 1/17/95 716-633-9500
SIGNATURE AND TYPED OR PRINTED NAME OF REGISTERED AGENT OR DIRECTOR Chairman Secretary/Treasurer