

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
May 30, 2003 8:00 am
Secretary of State

05-30-2003 90084 018 ***158.75

DOCUMENT # P93000012195

1. Entity Name
AIRPORT INTEGRATED SYSTEMS, INC.



Principal Place of Business
3561 SOUTH QUEBEC STREET
DENVER CO 80237
US

Mailing Address
3561 SOUTH QUEBEC STREET
DENVER CO 80237
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **65-0488174**

Applied For

Not Applicable

5. Certificate of Status Desired ☒ **\$8.75 Additional**

Fee Required

☐ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

CT CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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 *[Signature]*
Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

May 27, 2003

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **CEO** ☐ Delete
NAME **HABECK, JENNIFER L**
STREET ADDRESS **3561 SOUTH QUEBEC STREET**
CITY-ST-ZIP **DENVER CO 80237**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **P** ☐ Delete
NAME **HABECK, DUANE A**
STREET ADDRESS **3561 SOUTH QUEBEC STREET**
CITY-ST-ZIP **DENVER CO 80237**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
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CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. 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 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:

[Signature]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

May 27, 2003
Date

720-482-6256
Daytime Phone #

CR2E034 (10/02)

Jay D. Graff

325 South 8th Street
Suite B
Quincy, IL 62301

Attachment
90138054

Certified Public Accountant

Telephone 217/222-7400
Facsimile 217/222-7400

Florida Department of State
Division of Corporations
P.O. Box 1500
Tallahassee, FL 32302-1500

May 21, 2003

RE: **Airport Integrated Systems, Inc.**
Doc #P93000012195

Enclosed is the 2003 Uniform Business Report with a check for \$158.75. Please be advised that I moved office location after tax season and am just now getting all my files sorted and located. I found Airport Integrated Systems, Inc. annual report in the process getting my new office situated. Since this report was not filed by May 1 and it was my fault that the report was not timely filed, I respectfully request you accept this report as being timely filed with the \$158.75 fee.

Sincerely yours

Jay D. Graff

Jay D. Graff, CPA