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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998 P9400002147 (4) DOCUMENT #
1. Corporation Name

FILED Aug 27 1998 8:00am Secretary of State

AIRLINE LUGGAGE U.S.A., INC. Mailing Address Principal Place of Business 700 BANYAN TRAIL 700 BANYAN TRAIL **BOCA RATON FL 33431 BOCA RATON FL 33431** DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 01/10/1994 2. Principal Place of Business 2a. Mailing Address FEI Number Applied For 21 65-0547032 Not Applicable 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees 28 Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible 30 Personal Property Tax due June 30 X Yes ☐ No 24 25 29 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent PALEY, GREGG M ESQ. 4800 N. FEDERAL HIGHWAY 62 Street Address (P.O. Box Number is Not Acceptable) SUITE 105E 63 BOCA RATON FL 33431 84 City 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 a gnature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELFTE Change Addition THLE 1.1 TITLE PLATH, ROBERT V NAME 1.2 NAME 32E034 700 BANYAN TRAIL BOCA RATON, FL 33431 **501 FAIRWAY DRIVE** STREET ADDRESS 1.3 STREET ADDRESS DEERFIELD BEACH FL 33441 CITY-ST-ZIF 1.4 CITY-\$1-ZIP Change DELETE Addition TITLE 2.1 TITLE 22 NAME NAME STREET ADDRESS 2.3 STREET ADDRESS 2. 4 CITY - ST - ZIP CITY-ST-ZIF Addition DELETE Change THE 3.1 1ITLE NAME 3.2 NAME STREET ADDRESS 3 3 STREET ADDRESS CITY - ST - ZIP 3.4. CITY - \$1 - ZIP ■ DELETE Change Addition TITLE 4.1 TITLE 4. 2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY - ST - ZIP CITY-ST-ZIP DELETE Change Addition TITLE 5 1 THILE NAME 5.2 NAME STREET ADDRESS 5.3 \$1REET ADDRESS CITY-ST-ZIP 5.4 C(1Y - ST - ZIP DELETE Change Addition 6.1 TITLE TITLE NAME 6.2 NAME STREET ADDRESS 63 STREET ADDRESS CITY-ST-7IP

14. Thereby certify that the information supplied with this filling 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 finual 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 rodiver 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 any dachment with an address.

6-19-98