

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J79679

FILED
May 05, 2004
Secretary of State

Entity Name: FAIRWAY TRAVEL, INC.

Current Principal Place of Business:

6175 N.W. 153RD STREET
MIAMI LAKES, FL 33014

New Principal Place of Business:

6500 RAINBOW LANE
DAVIE, FL 33331 US

Current Mailing Address:

6175 N.W. 153RD STREET
MIAMI LAKES, FL 33014

New Mailing Address:

6500 RAINBOW LANE
DAVIE, FL 33331 US

FEI Number: 59-1650349

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

THEOBALD, GEORGE JR.
6175 N.W. 153RD STREET
MIAMI LAKES, FL 33014 US

Name and Address of New Registered Agent:

THEOBALD, GEORGE JR.
6500 RAINBOW LANE
DAVIE, FL 33331 US

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.

SIGNATURE: GEORGE THEOBALD JR

05/05/2004

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: VT () Delete
Name: THEOBALD, GEORGE JR.
Address: 6175 N.W. 153RD ST.
City-St-Zip: MIAMI LAKES, FL

Title: PS () Delete
Name: THEOBALD, SALLY
Address: 6175 N.W. 153RD ST.
City-St-Zip: MIAMI LAKES, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VT (X) Change () Addition
Name: THEOBALD, GEORGE JR.
Address: 6500 RAINBOW LANE
City-St-Zip: DAVIE, FL 33331 US

Title: PS (X) Change () Addition
Name: THEOBALD, SALLY
Address: 6500 RAINBOW LANE
City-St-Zip: DAVIE, FL 33331 US

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: SALLY THEOBALD

P

05/05/2004

Electronic Signature of Signing Officer or Director

Date