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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F09593

(7)

EXECUTIVE AIRPORT RESTAURANT, INC.

FILED
Apr 15 1997 8:00am
Secretary of State



						{				
Principal Place of Business Mailing Address			TIEDOLADEO							
BERTH 23 - PORT EVERGLADES PO BOX 22831		PO BOX 22831								
FT. LAUDERD	ALE FL 33335	FT. LAUDERDALE FL 333	35-2831				Data Income to the One 186 of	T &= - B:		
							Date Incorporated or Qualified 10/16/1980		te of Last I 29/1996	
2. Principal Place of Business		2a. Mailing Address 26			4. FEI Number 59-2408297				applied For lot Applicable	
Suite, Apt	#, etc.	Suite, Apt. #, etc.			5.	Certificate of Status Desired			Additional Required	
City & Stat	te	City & State			6.	Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees			
Zip	Country	Zip	Cou	intry		8.	This corporation has liability for it			
24	25	29	30				Florida Statutes	Yes [] No	
	9. Name and Address of Currer	nt Registered Agent		Щ		10.	Name and Address of New Re	gistered /	igent	
	CKSON, LEON W.			81	Name					
	S SE 25TH AVENUE			82	Street Add	ress (F	O. Box Number is Not Acceptab	le)	-,	
FT.	LAUDERDALE FL 33301					`				
				83	*****					
				84	City			FL		Code
11. Pursuant	to the provisions of Sections 607.050 registered agent, or both, in the State am familiar with, and accept the oblig	2 and 607.1508, Florida Statu	ites, the a	bove	-named cor	poratio	n submits this statement for the p	urpose of	changing	its registered
agent. I a	am familiar with, and accept the oblig	ations of, Section 607.0505, F	lorida Sta	tules	i.	ilion a r	bodia of directors. Thoroby accep	it tilo orbiti	Jiminioni u	a rogistored
SIGNATURE	Signature, typed or ponted name of registered age	and the develoption (AIO	TE: Basistess		ni signature regu	lead whee	a a a a a a a a a a a a a a a a a a a	DATE		
12.		D DIRECTORS	13.	u Ape	ut piåustore redo		ADDITIONS/CHANGES TO OFFIC		DIRECTO	RS IN 12
TITLE	DP	☐ DELETE	1.1 T	ITLE	····				☐ Change	Addition
NAME	JACKSON, LEON W		1.2 N	AME						
STREET ADDRESS	713 SE 25TH AVENUE		1.3 S	TREET	ADDRESS					
CITY-SE-ZIP	FT. LAUDERDALE FL		1.4 0	ITY - S	T-ZIP					
1HTLE	\$	☐ DELETE	21 Ti	ITLE					Change	Addition
NAME	JACKSON, KATHLEEN S		22 N	IAME						
STREET ADDRESS	713 SE 25TH AVENUE FT. LAUDERDALE FL		1		ADDRESS					
City-\$1-76	FI. LAUDENDALE FL	DELETE		CITY-S	ST-ZIP				Change	☐ Addition
TITLE NAME		FT DETELE	31 TI 32 N						C cuanda	Addition
STREET ADDRESS					ADDRESS					
CITY - S1 - 7IP				OTY-S						
TITLE		DELETE	4.1 T		4.11				Change	Addition
NAME			4.21	VAME					·	
STREET ADDRESS			4.3 S	TREET	ADORESS					
City-St-ZiP			4.4 C	ITY-S	T-ZIP					
TITLE		☐ DELETE	5.1 7	ITLE					☐ Change	Addition
NAME			5.2 N	AME						
STREET ADDRESS			5.3 S	TREET	ADDRESS					
CITY - ST - ZIP		[] oner		ITY-S	T-ZIP		···		Chance	a statistica -
TIFLE		☐ DELETE	6.1 T						Change	Addition
NAME			6.2 N		ABABTOS					
STREET ADDRESS					ADDRESS					
CITY - ST - ZIP	1		6.4 C	HTY-S	r-ZIP					

4. I do 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 is upplemental 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 N if changed, or on an attachment with an address.

SIGNATURE:

GNATURE AND TYPES OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

PRESIDENT!

49/91 254/522