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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F9600001611 (0)

LAKER TRAVEL INC.

Mailing Address

FILED Apr 27 1998 8:00am Secretary of State



Principal Place	of Business	Mailing Address					
6261 NW 6TH WAY #201 6261 NW 6TH			AY #201				
FT LAUDERDALE FL 33309		FT LAUDERDALE FL	33309		DO NOT WRITE IN THIS SPACE		
					3. Date Incorporated or Qualified	O OF ACE	
					03/29/1996		
Dringing! Pl	ace of Business	2a. Mailing Address			4. FEI Number	TA	pplied For
21 21	ace of Business	26			65-0642018	⊢ +	lot Applicable
Suite. Apt. #. etc.			Suite, Apt. #, etc.		SR 75 Additional		
22		27			5. Certificate of Status Desired		Required
City & State		City & State			6. Election Campaign Financing	\$5.00) May Be
23		28	28		Trust Fund Contribution		
Zip			Country		8. This corporation owes or has paid the	current vear Ir	ntangible
24	25	29	30	-	Personal Property Tax due June 30.		□No
	9. Name and Address of Cur	rent Registered Agent			10. Name and Address of New Registers	d Agent	
C 1	CORPORATION SYSTEM			Name			
1200 SOUTH PINE ISLAND ROAD				32 Street Add	desar (D.O. Flav Number in Not Appendable)		
	ANTATION FL 33324		- 1	Street Add	Street Address (P.O. Box Number is Not Acceptable)		
	THE TENTE		li li	33			
			L				
			Į,	City	F	85 Zip	Code
dd Directori	the provisions of Contines 507.6	0602 and 607 1609 Florida S	tatutes the sh	ove-named col			its registered
office or r	egistered agent, or both, in the St	tate of Florida. Such change v	vas authorized	by the corpora	rporation submits this statement for the purposation's board of directors. I hereby accept the a	ippointment a	s registered
agent I a	m tamiliar with, and accept the ot	eligations of, Section 607.050	5, Florida Statu	tes.			
SIGNATURE					ulred when reinstating) DATI	-	
	Signature, typed or printed name of registered	AND DIRECTORS	(NOTE Registered	Agent signature requ	ADDITIONS/CHANGES TO OFFICERS A		BS IN 12
12. TITLE	DC OFFICERS	DELETE		F I	ADDITIONS SI PRINCES TO STITUE TO	Change	
	WYATT, OSCAR S JR		1.2 NA	- 1			
NAME	1620 RIVER OAKS BLVD			1			
STREET ADDRESS	HOUSTON TX 77019			EET ADORESS			
CITY-ST-ZIP	D D	DELETE		r-ST-ZIP		Change	Addition
TITLE						ontango	ricalion
NAME	FREITSCH, HERMAN MICH	TACL	2.2 NA	-			
STREET ADORESS	3002 QUENBY			EET ADDRESS			
CITY-ST-ZIP	HOUSTON TX 77005			Y-ST-ZIP			Addition
TITLE	D	☐ DELETE				Change	Addition
NAME	LAKER, SIR FREDDIE	I BALLA VANCE NUE	3.2 NA				
STREET ADDRESS	194 PALM KEY RD, ROYA	= "	3.3 STF	EET ADORESS			
CITY - ST - ZIP	BOCA RATON FL 33432-7			Y-ST-ZIP			
TITLE	Р	☐ DELETE	4.1 1111	.E		☐ Change	☐ Addition
NAME	KENNEY, JAMES B		4. 2 NA	ME			
STREET ADORESS	6261 NW 6TH WAY #201		4.3 STF	EET ADDRESS			ŀ
CITY-ST-ZIP	ft lauderdale fl		4.4 CIT	Y-ST-ZIP			
TITLE	S	DELETE	5.1 TIT	.E		☐ Change	☐ Addition
NAME	BECKMAN, ROBERT M		5.2 NAI	AE			
STREET ADDRESS	1150 CONNECTICUT AVE	NW, 9TH FLR	5.3 STF	EET ADDRESS			
CITY-ST-ZIP	WASHINGTON DC 20036-			Y-\$T-ZIP			
TITLE		DELETE				☐ Change	☐ Addition
NAME			6.2 NA	1	•		[
				EET ADDRESS			
STREET ADORESS							
CITY-ST-ZIP			6.4 CII	Y-ST-ZIP			

I. 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 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 if changed, or on an attachment with an address.

SIGNATURE:

JAMES B, KENNEY

4/20/94

954-2020444