

# **2006 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# J79679

**FILED**  
**Nov 19, 2006**  
**Secretary of State**

**Entity Name:** FAIRWAY TRAVEL, INC.

**Current Principal Place of Business:**

6500 RAINBOW LANE  
DAVIE, FL 33331 US

**New Principal Place of Business:**

1715 LINTON LAKE DRIVE  
UNIT B  
DELRAY BEACH, FL 33445 US

**Current Mailing Address:**

6500 RAINBOW LANE  
DAVIE, FL 33331 US

**New Mailing Address:**

1715 LINTON LAKE DRIVE  
UNIT B  
DELRAY BEACH, FL 33445 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.  
6500 RAINBOW LANE  
DAVIE, FL 33331 US

**Name and Address of New Registered Agent:**

OLDENBURG, CHERIE  
14738 BRECKNESS PLACE  
MIAMI LAKES, FL 33014 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: CHERIE OLDENBURG

11/19/2006

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: 6500 RAINBOW LANE  
City-St-Zip: DAVIE, FL 33331 US

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

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P/T (X) Change ( ) Addition  
Name: THEOBALD, SALLY P/S  
Address: 1715 LINTON LAKE DRIVE  
City-St-Zip: DELRAY BEACH, FL 33445 US

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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/T

11/19/2006

Electronic Signature of Signing Officer or Director

Date