


FILE NOW: Fee after May 1, will be \$588.75

**APPROVED
AND
FILED**

1997 APR 21 AM 10:13

**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

LIMITED LIABILITY COMPANY ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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FILING FEE \$ 203.75	Annual Report \$100.00 + \$103.75 Corporation Supplemental Fee Make Check Payable To: FLORIDA DEPARTMENT OF STATE
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1. Name and Mailing Address of Limited Liability Company	DOCUMENT # L95000000679
LAKER INFORMATION SYSTEMS, L.C. C/O LAKER AIRWAYS, THE JET CENTER 1170 LEE WAGENER BLVD., SUITE 200 FORT LAUDERDALE FL 33315	
If above mailing address is incorrect in any way, line through incorrect information and enter correction in Block 2a.	

1a. Principal Place of Business Address
C/O LAKER AIRWAYS, THE JET CE 1170 LEE WAGENER BLVD., SUITE FORT LAUDERDALE FL 33315

2. Principal Place of Business	2a. Mailing Address
Suite, Apt. #, etc. SUITE 116	1100 LEE WAGENER BLVD
City & State	City & State
Zip	Country

3. Date Organized or Qualified	3a. State of Formation
09/06/1995	FL
4. FEI Number	<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable
65-0614322	
5. Date of Last Report	6. Certificate of Status Desired
02/26/1996	\$8.75 Additional Fee Required <input type="checkbox"/>


7. Name and Address of Current Registered Agent
BURT, FRANK G JORDEN BURT 7 BERENSON 777 BRICKELL AVENUE, 5TH FLOOR MIAMI FL 33131

8. Name and Address of New Registered Agent	
Name	
Street Address (P.O. Box Number is Not Acceptable)	
000002155300-3	
Suite, Apt. #, etc.	
04/25/97 01074-014 ****203.75 ****203.75	
City	Zip Code
FL	

9. Pursuant to the provisions of Sections 608.416 and 608.508, Florida Statutes, the above-named limited liability company 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 affirmative vote of a majority of the members. I hereby accept the appointment as registered agent, and accept the obligations.

SIGNATURE _____ DATE _____
(Registered Agent Accepting Appointment) (NOTE: Registered Agent signature required when reinstating)

10. Title	Managing Members/Managers	Business Street Address	City, State and Zip Code
MGR	TAYLOR, SCOTT	1170 LEE WAGENER BLVD., SU	FORT LAUDERDALE FL
MGR	TARTARO, ALEX	1100 LEE WAGENER BLVD., NO	FORT LAUDERDALE FL

11. 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 true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes; and that my name appears in Block 10, or on an attachment with an address.
SIGNATURE:  4/18/97 (954) 202-0444 x210
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER