SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997.
AMOUNT DUE ON OR BEFORE 9/17/97: $550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: $750.)

PROFIT CORPORATION ANNUAL REPORT
1997

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
97 SEP 15 AM 11:15
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P40447** (5)

1. Corporation Name
LAKER AIRWAYS (BAHAMAS) LIMITED, INC.

Principal Place of Business	Mailing Address
1170 LEE WAGENER BLVD SUITE 200 FT LAUDERDALE FL 33315 US	1170 LEE WAGNER BLVD SUITE 200 FT LAUDERDALE FL 33315 US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 09/11/1992
3a. Date of Last Report: 04/09/1996
4. FEI Number: 65-0327182 ☐ Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☐ No

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc 22	Suite Apt. #, etc. 27
City & State 23	City & State 28
Zip / Country 24 / 25	Zip / Country 29 / 30

9. Name and Address of Current Registered Agent

MAINO, MARY
1031 IVES DAIRY ROAD, SUITE 127
MIAMI FL 33179

10. Name and Address of New Registered Agent

81 Name: Maino, Mary
82 Street Address (P.O. Box Number is Not Acceptable)
83: 1170 Lee Wagener Blvd, Suite 200
84 City: Ft. Lauderdale FL 85 Zip Code: 33315

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation 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 the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	CD	☐ DELETE	1.1 TITLE	☒ Change ☐ Addition
NAME	LAKER, FREDDIE, SIR		1.2 NAME	
STREET ADDRESS	1041 IVES DAIRY RD STE 137		1.3 STREET ADDRESS	1170 Lee Wagener Blvd Suite 200
CITY-ST-ZIP	MIAMI FL		1.4 CITY-ST-ZIP	Ft. Lauderdale, Fl 33315
TITLE	S	☐ DELETE	2.1 TITLE	☐ Change ☐ Addition
NAME	MOSS, WILLIE		2.2 NAME	
STREET ADDRESS	P.O. BOX F-2666,FREEPORT N/A		2.3 STREET ADDRESS	
CITY-ST-ZIP	GR. BAHMA IS,BAHAMAS		2.4 CITY-ST-ZIP	
TITLE	D	☐ DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME	PRICE, JOHN		3.2 NAME	500002294025--9
STREET ADDRESS	895 THIRD AVENUE		3.3 STREET ADDRESS	-09/16/97--01027--018
CITY-ST-ZIP	NEW YORK NY		3.4 CITY-ST-ZIP	****165.00 ****165.00
TITLE	D	☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME	WYATT, OSCAR S., JR.		4.2 NAME	
STREET ADDRESS	9 GREENWAY PL, #780		4.3 STREET ADDRESS	
CITY-ST-ZIP	HOUSTON TX		4.4 CITY-ST-ZIP	
TITLE	D	☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME	MILLER, ALBERT J.		5.2 NAME	
STREET ADDRESS	P.O. BOX F-2666,FREEPORT N/A		5.3 STREET ADDRESS	SL 9.15.97
CITY-ST-ZIP	GR. BAHAM IS,BAHAMAS		5.4 CITY-ST-ZIP	
TITLE		☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME			6.2 NAME	
STREET ADDRESS			6.3 STREET ADDRESS	
CITY-ST-ZIP			6.4 CITY-ST-ZIP	

CR2E034 (4/97)

14. 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 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.

LAKER AIRWAYS (BAHAMAS) LTD.
1170 LEE WAGENER BLVD. SUITE 200
FT. LAUDERDALE, FL 33315

17394

BARNETT BANK
MIAMI BEACH, FLORIDA 33139
63-398-670

0017394

PAY **** ONE HUNDRED SIXTY FIVE & 00/100 DOLLARS

DATE 05/07/97

AMOUNT ********$165.00

TO THE ORDER OF:
FLORIDA DEPT OF REVENUE
P.O. BOX 2096
TALLAHASSEE, FL 32316-2096

Security features included. Details on back.

⑈017394⑈ ⑆067003985⑆ 4596000289⑈ ⑈0000016500⑈

NB

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DO NOT STAPLE IN THIS AREA