2002 Uniform Business Report (UBR)

SIGNATURE:

DOCUMENT # P40447 **Secretary of State** 1. Entity Name LAKER AIRWAYS (BAHAMAS) LIMITED, INC. 03-12-2002 90997 015 ***150.00 Mailing Address Principal Place of Business 1170 LEE WAGENER BLVD 1170 LEE WAGENER BLVD SUITE 200 SUITE 200 FT LAUDERDALE FL 33315 FT LAUDERDALE FL 33315 IIS US 3. Mailing Address 2. Principal Place of Business DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. City & State Applied For 4. FEI Number City & State 65-0327182 Not Applicable Country Zip Country Zip \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name MAINO, MARY Street Address (P.O. Box Number is Not Acceptable) 1170 LEE WAGENER BLVD SUITE 200 Zip Code FT LAUDERDALE FL 33315 City FL 8. 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* DATE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After May 1, 2002 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 11. (9/01)☐ Delete ☐ Change Addition TITLE TITLE CD LAKER, FREDDIE, SIR NAME NAME CR2E034 STREET ADDRESS STREET ADDRESS 1170 LEE WAGENER BLVD SUITE 200 CITY-ST-ZIP FT LAUDERDALE FL 33315 CITY-ST-ZIP ☐ Addition Change ☐ Delete TITLE TITLE NAME NAME MOSS. WILLIE STREET ADDRESS STREET ADDRESS P.O. BOX F-2666, FREEPORT CITY-ST-ZIP CITY-ST-ZIP GRAND BAHAHA ISLANDS Change TITLE-🚐 🏅 🗖 Delete 🕳 TITLE-والأراء وعيان جصاحب NAME NAME MILLER, ALBERT J STREET ADDRESS STREET ADDRESS P.O. BOX F-2666, FREEPORT CITY-ST-ZIP CITY-ST-7IP GRAND BAHAHA ISLANDS Change ☐ Addition ☐ Delete TITLE TITLE NAME WYATT, OSCAR S., JR. STREET ADDRESS STREET ADDRESS 9 GREENWAY PL, #780 CITY-ST-ZIP CITY-ST-ZIP HOUSTON TX Change ☐ Addition TITLE ☐ Delete NAME MAINO, MARY NAME STREET ADDRESS STREET ADDRESS 1170 LEE WAGENER BLVD. #200 CITY-ST-ZIP CITY-ST-ZIP FT. LAUDERDALE FL 33315 Addition ☐ Delete TITLE □ Change TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

13. 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 report or supplemental 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 frustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

FILED

Mar 12, 2002 8:00 am