

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P40447

FILED
Jul 12, 2004
Secretary of State

Entity Name: LAKER AIRWAYS (BAHAMAS) LIMITED, INC.

Current Principal Place of Business:

1100 LEE WAGNER BLVD.
SUITE 203
FT LAUDERDALE, FL 33315 US

New Principal Place of Business:

Current Mailing Address:

1100 LEE WAGNER BLVD.
SUITE 203
FT LAUDERDALE, FL 33315 US

New Mailing Address:

FEI Number: 65-0327182 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MAINO, MARY
1170 LEE WAGENER BLVD
SUITE 200
FT LAUDERDALE, FL 33315 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: CD () Delete
Name: LAKER, FREDDIE, SIR,
Address: 1170 LEE WAGENER BLVD SUITE 200
City-St-Zip: FT LAUDERDALE, FL 33315

Title: S () Delete
Name: MOSS, WILLIE,
Address: P.O. BOX F-2666,FREEPORT
City-St-Zip: GRAND BAHAMA ISLANDS,

Title: D () Delete
Name: MILLER, ALBERT J
Address: P.O. BOX F-2666,FREEPORT
City-St-Zip: GRAND BAHAMA ISLANDS,

Title: D (X) Delete
Name: WYATT, OSCAR S., JR.,
Address: 9 GREENWAY PL, #780
City-St-Zip: HOUSTON, TX

Title: D () Delete
Name: MAINO, MARY
Address: 1170 LEE WAGENER BLVD. #200
City-St-Zip: FT. LAUDERDALE, FL 33315

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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 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 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: MARY MAINO

D

07/12/2004

Electronic Signature of Signing Officer or Director

_____ Date