

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



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

DOCUMENT # S41651 (8)

1. Corporation Name

PARKWAY EAST CONCESSIONS, INC.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 MAR 14 AM 10:05

Principal Place of Business

2888 E OAKLAND PARK BLVD
FT LAUDERDALE FL 33306

Mailing Address

2888 E OAKLAND PARK BLVD
FT LAUDERDALE FL 33306

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

03/28/1991

3a. Date of Last Report

04/07/1994

4. FEI Number

65-0254242

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 has liability for intangible tax under S. 199.032,
Florida Statutes

☒ Yes

☐ No

2. Principal Place of Business

21. State, Apt. #, etc.

2a. Mailing Address

26. State, Apt. #, etc.

22. City & State

27. City & State

23. Zip

Country

28. Zip

Country

24. Zip

25. Country

29. Zip

30. Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

LERNER, ALLAN M
2888 E OAKLAND PARK BLVD
FT LAUDERDALE FL 33306

81. Name

82. Street Address (P.O. Box Number is Not Acceptable)

83. City

84. City

FL

85. Zip Code

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

Signature of officer (print name of registered agent and the registrant)

NOTE: Registered Agent signature required when registering

DATE

12. OFFICERS AND DIRECTORS

1. TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

2. TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

3. TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

4. TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

5. TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

6. TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

7. TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

8. TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. 1. TITLE ☐ Change ☐ Addition

12. NAME

13. STREET ADDRESS

14. CITY - ST - ZIP

2. 2. TITLE ☐ Change ☐ Addition

22. NAME

23. STREET ADDRESS

24. CITY - ST - ZIP

3. 3. TITLE ☐ Change ☐ Addition

32. NAME

33. STREET ADDRESS

34. CITY - ST - ZIP

4. 4. TITLE ☐ Change ☐ Addition

42. NAME

43. STREET ADDRESS

44. CITY - ST - ZIP

5. 5. TITLE ☐ Change ☐ Addition

52. NAME

53. STREET ADDRESS

54. CITY - ST - ZIP

6. 6. TITLE ☐ Change ☐ Addition

62. NAME

63. STREET ADDRESS

64. CITY - ST - ZIP

14. I hereby certify that the information reported with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(a), Florida Statutes. I have verified that the information contained on this annual report or supplementary annual report is true and accurate and that my signature shall have the same legal effect as if made under oath. 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 on Block 12 or Block 13 or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF REGISTERING OFFICER OR DIRECTOR

3/9/95

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