PROFIT **CORPORATION** ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # S41651

PARKWAY EAST CONCESSIONS, INC.

FILED Feb 11, 1999 8:00am **Secretary of State**

02-11-1999 90063 020 ***150.00



Principal Place of Business Mailing Address					1 (MALICALE III GLEBAT ISBUTA ATCAN ESTAT IIBL AND	II BIRLI BIRLI AMUL AL	III E1811 1881
2888 E OAKLAND PARK BLVD					DO NOT WRITE IN TH	IIS SPACE	
					3. Date Incorporated or Qualifed		
					03/28/1991		
2. Principal Place of Business 2a. Mailing Address					4. FEI Number	App	lied For
21		26			65-0254242		Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired Fee Required		
City & State		City & State	28		6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees		
Zip	Country	Zip	Cou	intry	8. This corporation owes the current year		ا ا
24	25	29	30	·	Personal Property Tax.		□No
	9. Name and Address of Curren	t Registered Agent		04 1	10. Name and Address of New Registere	ad Agent	
				81 Name			
LERNER, ALLAN M 2888 E OAKLAND PARK BLVD				82 Street Ac	ddress (P.O. Box Number is Not Acceptable)		
FT L	AUDERDALE FL 33306			83		i di Maria di Maria di Maria. Maria di Maria di Maria di Maria	
				84 City	\$ 1 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	85 Zip Co	ode
						L	eciotorad
· office or re	to the provisions of Sections 607.050; egistered agent, or both, in the State of m familiar with, and accept the obligat	of Florida, Such change was	autnonze	DV the corpora	orporation submits this statement for the purpose ation's board of directors. I hereby accept the ap	pointment as regi	istered
SIGNATURE					uired when reinstating). DATE		
	Signature, typed or printed name of registered agen			Agent signature requ	uired when reinstating)', DATE ADDITIONS/CHANGES TO OFFICERS		RS IN 12
12.		D DIRECTORS	13.	7.E		Change	· Addition
TITLE	P ALLANIA		1.2 N		100	_ ,	_
NAME	LERNER, ALLAN M.			TREET ADDRESS			
STREET ADDRESS	2888 E OAKLAND PK BLVD.						
CITY-ST-ZIP	FT LAUDERDALE FL	☐ DELETE	2.1 77	TY-ST-ZIP		☐ Change	Addition
TITLE							
NAME			2.2 N				
STREET ADDRESS				TREET ADDRESS			1
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NAME	•		3.2 N				
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STREET ADDRESS				ITY-ST-ZIP	s - 47		
CITY-ST-ZIP	:	☐ DELETE	6.1 T		<u> </u>	☐ Change	Addition
TITLE	, `		6.2 N				_
NAME				TREET ADDRESS			
STREET ADDRESS				ITY-ST-7IP			Į

14. 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 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, with all other like empowered.