

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

PROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # **J60284** (3)

1. Corporation Name
LAMPLIGHTER MOTEL, INC.



Principal Place of Business: **551 N. ATLANTIC BLVD. FT. LAUDERDALE FL 33304**
Mailing Address: **551 N. ATLANTIC BLVD. FT. LAUDERDALE FL 33304**

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

3. Date Incorporated or Qualified: **03/05/1987**
3a. Date of Last Report: **10/09/1995**
4. FEI Number: **65-0001282**
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

g. Name and Address of Current Registered Agent

**DALAL, ASHOK
633 NE 167 STREET, #607
NORTH MIAMI FL 33162**

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City, FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.04(1) and 607.15(4), Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent of record in the State of Florida. Such change was authorized by the corporation's board of directors, hereby, accept the appointment as registered agent. I am the sole officer and director of the corporation. See s. 607.04(1)(b), Florida Statutes.

SIGNATURE

Ashok Dalal
OFFICERS AND DIRECTORS

02-09-96

12. OFFICERS AND DIRECTORS
1. NAME: **D MOTWANI, RAMOLA**
2. STREET ADDRESS: **551 N. ATLANTIC BLVD FT. LAUDERDALE FL**
3. CITY, ST, ZIP
4. TITLE
5. NAME
6. STREET ADDRESS
7. CITY, ST, ZIP
8. TITLE
9. NAME
10. STREET ADDRESS
11. CITY, ST, ZIP
12. NAME
13. STREET ADDRESS
14. CITY, ST, ZIP
15. TITLE
16. NAME
17. STREET ADDRESS
18. CITY, ST, ZIP
19. TITLE
20. NAME
21. STREET ADDRESS
22. CITY, ST, ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
1. TITLE Change Addition
2. NAME
3. STREET ADDRESS
4. CITY, ST, ZIP
5. TITLE Change Addition
6. NAME
7. STREET ADDRESS
8. CITY, ST, ZIP
9. TITLE Change Addition
10. NAME
11. STREET ADDRESS
12. CITY, ST, ZIP
13. TITLE Change Addition
14. NAME
15. STREET ADDRESS
16. CITY, ST, ZIP
17. TITLE Change Addition
18. NAME
19. STREET ADDRESS
20. CITY, ST, ZIP

14. I declare, hereby, that the information supplied by this corporation, state by law, is true and correct, and that the corporation is qualified for the exemption stated in Section 119.07(3)(g), Florida Statutes. I further certify that the information provided in this report is prepared in accordance with the annual report and financial records 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 of this report as a valid agreement with an address.

SIGNATURE: *Ramola Motwani*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

02-09-96 954-564-2345

CR2E034 (12/95)