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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1996

DOCUMENT #

K84463

(4)

1. Corporation	Name							
ALAMO	O MOTEL, INC.							
Principal Place of	of Business	Mailing Address				ND SOLF BEDIE DINSE BENGE ANDER ANDER DINSE FANDE		
2000 N FEDERAL HWY HOLLYWOOD FL 33020-2226		2000 N FEDERAL HWY HOLLYWOOD FL 33020-2226						
					3. Date incorporated or Qualified 05/01/1989	3a. Date of Last Report 01/18/1995		
2. Principal Pla	ice of Business	2a. Mailing Address			4, FEI Number	, Applied For		
2. Principal Place of Bushess		26			65-0141066 Not Applicable			
Suite, Apt. #, etc.		Suite, Apt. #, etc.	Suite, Apt. ⊭, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required		
City & State		City & State	City & State		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees		
Zф 2 ф	Country 25	Ζφ	Country	,	8. This corporation has liability for Florida Statutes 😧 Yes	ntangible tax under s 199.032, ☐ No		
	9 Name and Address of Curre	ent Registered Agent	<u> </u>		10. Name and Address of New Registered Agent			
2000 N	, JAGDISH M. (VICE PRESIDE) I. FEDERAL HIGHWAY WOOD FL 33020	ιτ)	82	81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City				
or register familiar wit	to the provisions of Sections 607.05 ed agent, or both, in the State of Fich, and accept the obligations of, Se	orica. Such change was authorized loction 607,0505, Florida Statutes.	by the con	oration's box	oration submits this statement for the purant of directors. I hereby accept the app	rpose of changing its registered office ointment as registered agent. I am		
12.		ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFF			
TILE	P	□ DELETE	1. 1 TIFLE			Change Addition		
NAME	1 124		1.2 NAME					
1 = 11 1 2 1 1 1 2 2 4			1.3 STRES	1 ADDRESS				
CITY - ST - ZIP	HOLLYWOOD FL		1.4 CITY	S1-7iP				
TITLE	INDECTITOOD IE	☐ DELETE	2 1 1011.5			Change		

12. OFFICERS AND DIRECTORS			13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE		DELETE	1. 1 TIFLE	☐ Change	Addition	
NAMÉ	RANCHHOD, M. T.	•	1.2 NAME			
STREET ADDRESS	2000 N. FEDERAL HWY.		13 STREET ADDRESS			
CITY-ST-ZIP	HOLLYWOOD FL		1.4 CITY S1 - 7(P			
TITLE	1,0501112051-	DELETE .	2 1 TITUE	☐ Change	☐ Addition	
NAME			2 7 NAME			
STREET ADDRESS			2 3 STREET ADDRESS			
CITY-ST-ZIP			2.4 C(1Y - ST - Z(P)			
TOTLE		DELETE.	3 * TITLE	☐ Change	Addition	
NAME			3.2 NAME			
STREET ADDRESS			33 STHEET ADDRESS			
CiTY - S1 - 7iP			3 4 City St-ZiP			
TITLE		☐ DEFELLE	4 1 TITLE	Change	Addition	
NAME			4.2 NAME			
STREET ADDRESS			4.3 STREET ADDRESS			
C:TY-ST-ZIP			4.4 CITY - ST - ZIF			
TITLE		☐ DELETE	5 t TITLE	☐ Chang	e 🔲 Addition	
NAME			5.2 NAME			
STREET ADDRESS			5.3 STREET ADDRESS			
CITY - S1 - ZIP			54 CITY-ST ZiP		A delica a	
T-TLE		☐ DELFT!	6 1 JH I F	Chang	e 🔲 Addition	
NAME			6.2 NAME			
STREET ADDRESS			6 3 STREET ADDRESS			
1			4.4.0.1V CL 310			

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 eath; 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.

SIGNATURE: Mayer to 12 Cor CHO D SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/4/96 305-921-7325

CR2E034 (12/95)