

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000061844

FILED
Apr 25, 2012
Secretary of State

Entity Name: ISLAND HOSPITALITY MANAGEMENT, INC.

Current Principal Place of Business:

50 COCOANUT ROW
STE. 200
PALM BEACH, FL 33480

New Principal Place of Business:

Current Mailing Address:

50 COCOANUT ROW
STE. 200
PALM BEACH, FL 33480

New Mailing Address:

FEI Number: 26-0250123

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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

OFFICERS AND DIRECTORS:

Title: MR
Name: POLLAK, ROGER A SECRETA
Address: 50 COCOANUT ROW STE 200
City-St-Zip: PALM BEACH, FL 33480

Title: MR
Name: WALKER, TIM PRES
Address: 50 COCOANUT ROW STE 200
City-St-Zip: PALM BEACH, FL 33480

Title: MRS
Name: BACHMAN, BARBARA TREAS
Address: 50 COCOANUT ROW STE 200
City-St-Zip: PALM BEACH, FL 33480

I hereby 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 all other like empowered.

SIGNATURE: BARBARA BACHMAN

TREA

04/25/2012

_____ Electronic Signature of Signing Officer or Director

_____ Date