## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**CORPORATION** ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # H08317

(0)

MNM MOTELS, INC.

## **FILED** Mar 11 1998 8:00am Secretary of State

DO NOT WHITE IN THIS SPACE    A Date Incorporated or Dunified   Colorest PALE   Colorest PALE	Ì					<u> </u>
AASEAND FL 33801  2.9 Principal Place of Brunness 2.9 Amining Addross 3. Date Incorporated or Crusinated 06/12/1984 3. Date Incorporated or Crusinated 06/12/1984 4. FEI Number 2.1 Sp2-2422553.  Sulfo, Apl. #, etc.  5.0 Carly & State 2.1 City & State 2.2 Country 2.3 Country 2.4 Country 2.5 Country 2.5 Country 2.6 Sulfo, Apl. #, etc. 2.7 Country 2.7 Country 2.8 Tour Hund Contribution 2.5 DO Away Be 7.7 Country 2.9 Sulfo, Apl. #, etc. 2.0 Country 2.0 Sulfo, Apl. #, etc. 2.1 Country 2.2 Tour Lund Contribution 2.2 Aware Bond Address of Current Registered Apont 3. Sulfo, Apl. #, etc. 3. Sulfo, Apl. #, etc. 3. Carly & State 2.0 Country 2.1 Country 2.2 Tour Lund Contribution 2.2 Name and Address of Current Registered Apont 3. Name and Address of New Registered Apont 3. Street Address (P.O. Box Number is Not Acceptable) 4. Name and Address of New Registered Apont 4. Register	Principal Place	e of Business	Mailing Address		n nominali mili malan layan ilini ilikir 1908 ilinik	ALDII ALDII BIBII BIBIL BIBII (BO)
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2. Maintipod Place of Business 2. Sa. Maintipod Address 2. Sa. Maintipod Maintipo	1 33		••		3. Date Incorporated or Qualified	1
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Salic Apt #, etc.  27   Store   Store		lace of Business	26. Mailing Address			Applied For
City & State    27	21				59-2422553	Not Applicable
City & State  23		#, etc.	Suite, Apt. #, etc.		5 Certificate of Status Desired	
20   Country   27   Country   27   Country   27   Country   28   Truet Fund Contribution   Added to Pees   Added to Pees   28   29   30   30   Truet Fund Contribution   Added to Pees   Added to Pees   28   29   28   30   Truet Fund Contribution   Added to Pees   28   29   28   29   29   30   Truet Fund Contribution   Added to Pees   28   29   29   28   29   29   29   29	22				a, communication distribution of the control of the	Fee Required
Zep	City & State	0	<b>├</b> ¬ '		, -	
26   26   30   Personal Property Tax due, June 30   Ves   No	23				· · · · · · · · · · · · · · · · · · ·	
DEV, MAHENDRA 244 NORTH FLORDIA AVE LAKELAND FL 38801  14 City  15 Name  16 City  16 City  17 Comparison to the proposed of Sections 607 (XXXX part of Epricial Statutes for Address (P.O. Box Number is Not Acceptable)  18 Treet Address (P.O. Box Number is Not Acceptable)  19 City  11 Principal to the proposed of Sections 607 (XXXX part of Epricial Statutes for Address (P.O. Box Number is Not Acceptable)  11 Principal to the proposed of Sections 607 (XXXX part of Epricial Statutes for Address (P.O. Box Number is Not Acceptable)  12 City  13 Principal Statutes  14 City  15 City  15 City  15 City  16 City  16 City  17 City  18 City  18 City  18 City  19 Ci		<b>∳</b> γ ′	<del>-</del>	<del></del>	,	
DEV, MAHENDRA 244 NORTH FLORDIA AVE LAKELAND FL 33801  11. Pursuant to the provisions of Sections 607 0502 and 607 1508. Florida Statutes, the bow-named corporation submits this statement for the purpose of changing its registered efficac or registered agent, or both, in the State of Floridin Such change was submitted by the comporation's board of directors. I hereby accept the epipolithem as registered efficacy or registered agent, and terminar with, and accept the obligations of, Section 607 2508, Florida Statutes.  SIGNATURE  12. OF FICE IS AND DIRECTORS   DELETE   1171116   DELETE   1171116	24			30		
LEY, MARENDRA 244 NORTH FLORDIA AVE LAKELAND FL 33801  82 Street Address (P.O. Box Number is Not Acceptable)  11. Pursuant to the provisions of Sections 607 6500 and 607 1568. Dehicle Statutes, the above-named corporation submits this statement for the purpose of changing its registered appetral and fermiliar with, and accept the obligations of. Section 607 6505. Florida Statutes  SIGNATURE  SIGNATURE  SIGNATURE  SUMMER VIEW OF FLORDIA AVE 11 TITLE  OF FICE RS AND DIFF. CTORS  12. OF FICE RS AND DIFF. CTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIFECTORS IN 12  TITLE  SET ADDITIONS/CHANGES TO OFFICERS AND DIFECTORS IN 12  12. AND DEV, MAHENDRA  12. NAME  DEV, MAHENDRA  12. NAME  DEV, JYOTI MAHENDRA  22. NAME  AND DEV, JYOTI MAHENDRA  22. NAME  22. NAME  AND DEV, MARENDRA  22. NAME  AND DEV, MARENDRA  22. NAME  AND DEV, MARENDRA  23. SIRET ADDRESS  CITY-51-72 P  TITLE  DELETE  2 TITLE  DELETE  2 TITLE  DELETE  2 TITLE  DELETE  4 TITLE  Change  Addition  NAME  PATEL, BHARTISEM M.  SIRET ADDRESS  SAN CARLOS CA  4 STIRET ADDRESS  SIRET ADDRESS  SAN CARLOS CA  4 STIRET ADDRESS  SIRET ADDRESS  SAN CARLOS CA  4 STIRET ADDRESS  SIRET ADDRESS  SIRET ADDRESS  SAN CARLOS CA  4 STIRET ADDRESS  SIRET ADDRESS  SIRET ADDRESS  SIRET ADDRESS  SIRET ADDRESS  SAN CARLOS CA  4 STIRET ADDRESS  SIRET ADDRESS  SIRET ADDRESS  SIRET ADDRESS  SAN CARLOS CA  4 STIRET ADDRESS  SIRET ADDRESS			i negistered Agent	81 Name	10. Hallo and Address of Hew Hegisto	TOU A BOILT
LAKELAND FL 33801    FL   85   Zip Code	_	•				
11. Pursuant to the provisions of Sections 607.05.02 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 Florids. Such change was authorized by the corporation's board of directors. I hereby accept the expositionent as registered office or registered agent. I am familiar with, and accept the obligations of. Section 607.0505, Florida Statutes.  SIGNATURE  SIGNATURE  Signature byte or present raise of inquisions implication of spot in a state of the proportion of the proportio		=		82 Street Add	dress (P.O. Box Number is Not Acceptable)	ļ
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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 nath, that I am an	14. I hereby o	ertify that the information supplied wi	th this filing does not qualify for	the exemption stated i	in Section 119.07(3)(i), Florida Statutes. I furthe	or certify that the information

indicated on rins annual report of supplemental annual roport is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a officer or director of the corporation of 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.