

**2023 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# K80282

**Entity Name:** AMERICAN HOSPITALITY ASSOCIATION, INC.

**Current Principal Place of Business:**

127 BELLAGIO CIRCLE  
SANFORD, FL 32771

**Current Mailing Address:**

127 BELLAGIO CIRCLE  
SANFORD, FL 32771 US

**FEI Number:** 59-2998401

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

DEWJI, SAJJAD G  
127 BELLAGIO CIRCLE  
SANFORD, FL 32771 US

*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

**Officer/Director Detail :**

Title PD  
Name DEWJI, NARGIS G  
Address 1867 PIEDMONT PLACE  
City-State-Zip: LAKE MARY FL 32746

Title SECRETARY  
Name DEWJI, MOHAMED G  
Address 1867 PIEDMONT PLACE  
City-State-Zip: LAKE MARY FL 32746

Title T  
Name DEWJI, SAJJAD G  
Address 5559 WHISPERING WOODS PT.  
City-State-Zip: SANFORD FL 32771

Title CEOD  
Name DEWJI, MOHAMED G  
Address 1867 PIEDMONT PLACE  
City-State-Zip: LAKE MARY FL 32746

Title TD  
Name DEWJI, SAJJAD G  
Address 5559 WHISPERING WOODS PT.  
City-State-Zip: SANFORD FL 32771

*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:** SAJJAD DEWJI

**DIRECTOR**

**05/19/2023**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date