Mar 09, 1999 8:00 am Secretary of State

03-09-1999 90058 031 ***150.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

ii Oorporddor	MENT # 469555 EA MOTEL OF COCOA BEA	CH, INC.						
Principal Place	of Business	Mailing Address			† (\$0)(§ BININ NEITO CHINE ALINE ALINE ALINE	1419 BIRN 8(81) B	MIC BINT CON	
3185 N. ATLANTIC AVE. COCOA BCH FL 32931		3185 N. ATLANTIC AVE. COCOA BCH FL 32931		DO NOT WRITE IN THIS	SPACE			
					3. Date Incorporated or Qualifed 03/07/1975		į	
2. Principal Pt	ace of Business	2a. Mailing Address			4. FEI Number	Apr	olied For	
21		26			59-1577382		Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5Certifcate of Status Desired .	\$8.75 A Fee Red	I	
City & State		City & State			6. Election Campaign Financing Trust Fund Contribution	\$5.00 i Added to		
Zip 24	Country 25	Zip 29 3	Countr 30	У	This corporation owes the current year Interpretation Personal Property Tax.		□No	
	9. Name and Address of Current	Registered Agent			10. Name and Address of New Registered	Agent		
GRENTNER, CHARLES G. 5001 NW 36TH STREET MIAMI SPRINGS FL 33166				_	fress (P.O. Box Number is Not Acceptable)			
MAIM	ni Sphings PL 33100		8.			85 Zip C	tode	
					FL	. -		
office or re agent. I as	egistered agent, or both, in the State on familiar with, and accept the obligat	of Florida, Such change was autons of, Section 607,0505, Florid	thorized b da Statute	y the corporat	poration submits this statement for the purpose of ion's board of directors. I hereby accept the appoi	changing its ntment as reg	registered jistered	
	Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered			ent signature requir	ure required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
12.	OFFICERS AN	DELETE	13. 1.1 TITLE		ADDITIONS/CHANGES TO OFFICERS A	Change	Addition	
TITLE	STDP GRENTNER, CHARLES G	Deterio	1.2 NAME					
NAME	831 S ATLANTIC AVE			ET ADDRESS				
STREET ADDRESS	COCOA BCH FL			i				
CITY-ST-ZIP	VPD	☐ DELETE	1,4 CITY- 2.1 TITLE			Change	Addition	
TITLE	•• =	OCCCTE	2.2 NAME				_	
NAME	GRENTNER, KATHERINE M. 831 S. ATLANTIC AVE.			ET ADDRESS				
STREET ADDRESS	COCOA BEACH FL		2.3 STRE		السائيل ۾ ان اس اليسائ	••	-	
CITY-ST-ZIP TITLE	COCOA BEAUTI FL	☐ DELETE	3.1 TITLE			☐ Change	Addition	
NAME			3.2 NAME					
1				ET ADDRESS				
STREET ADDRESS			34 CITY	i			i	
CITY-ST-ZIP TITLE		DELETE	4.1 TITLE			Change	☐ Addition	
NAME		-	4. 2 NAM					
STREET ADDRESS				ET ADDRESS		;		
			4.4 CITY-					
CITY-ST-ZIP TITLE		☐ DELETE	5.1 TITLE			Change	☐ Addition	
NAME			5.2 NAME					
STREET ADDRESS			5.3 STRE	ET ADDRESS		٠, ١	* *	
CITY-ST-ZIP			5.4 CITY-	ST-ZIP	·			

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 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 if changed, or on an attachment with an address, with all other like empowered.

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

TITLE

NAME

STREET ADDRESS

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DELETE

2/15/99 305/865-7100

☐ Change

Addition

CR2E034 (11/98)