


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 07, 2005 08:00 AM
Secretary of State

DOCUMENT # 811924 - . . . 1. Entity Name GREEN HOTELS, INC.	
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Principal Place of Business 7309 BALTIMORE AVE., #115 P.O. BOX 2736 COLLEGE PARK, MD 20740	Mailing Address 7309 BALTIMORE AVE., #115 P.O. BOX 2736 COLLEGE PARK, MD 20740
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01032005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 53-0226540	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM
 1200 S. PINE ISLAND ROAD
 PLANTATION, FL 33324

DO NOT WRITE IN THIS SPACE

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____
Signature, typed or printed name of registered agent and title if applicable.

FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSD GREEN, CARLTON M 7309 BALTIMORE AVE., #115 COLLEGE PARK, MD
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VDT GILLIONS, BRIAN M. 7309 BALTIMORE AVE. 115 COLLEGE PARK, MD
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 01/10/05-80025-024 158.75

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12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:  **BRIAN M. GILLIONS**
 Date: 1/3/05 Daytime Phone #: 3019271216