2003-FOR PROFIT CORPORATION

UNIFORM BUSINESS REPORT (UBR) F02000004555 **DOCUMENT #**



FILED Mar 20, 2003 8:00 am § Secretary of State

ASSA ABLOY HOSPITALITY INC.								03-20-200	3 90098 ()45 ***15	0.00	
Principal Place of Business 9333 FOREST LANE DALLAS TX 75243			9333	Mailing Address 9333 FOREST LANE DALLAS TX 75243				1 / 1 1 1 1 1 1 1 1 1 1 				
2. Principal F	Place of Busin	ness	3. Mai	iling Address	· · · · ·							
Suite, Apt. #, etc.			Suit	Suite, Apt. #, etc.				CHECK HERE IF MAKING CHANGES				
City & State			City	City & State			4. F	FI Number 75-191240	1 75-19	17 (INU	Applied For Not Applicable	}
Zip		Country	Zip		Coun	try		ertificate of Status Desired		\$8.75 A		
-	6. Name	and Address of Curre	ent Registere	ed Agent			7N:	ame and Address of New	Registered	Agent		
C T CORPORATION SYSTEM						Name Street Address		CE Scott	ole)			
1200 SOU	ITH PINE IS	LAND ROAD										1
PLANTATIO	ON FL 3332	24				931 W	leko	va Springs,	Rd			
						city Lor	naun	pd i	F			
8. The above the obligat	e named entity tions of regist	y submits this statement ered agent.	nt for the purp	ose of changing its	registere	ed office or regist	tered age	nt, or both, in the State of	Florida. I am	n familiar with	and accept	
SIGNATURE .	Signature, typed	or printed name of egistored ac	gent and title if app	olicable (NOTE	: Registere	d Agent signature requir	ired when rein	nstating)	DATE	<u> </u>	<u> </u>	
		! FEE IS \$150.00	nn					9. Election Campaign I	_		00 мау Ве	
After	r May 1, 200	3 Fee will be \$550.0						Election Campaign I Trust Fund Contribut	_		00 May Be ed to Fees	
After Make Check	r May 1, 200	3 Fee will be \$550.0 Florida Departmen	t of State	PRS	11.		ADD	Trust Fund Contribut	ion.	☐ Adde	ed to Fees	
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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:

972-692-3138