## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 28, 2008 08:00 AN
Secretary of State

		<del></del>		•			tury or S.
DOCUMENT # F15987  1. Entity Name SHAN MOTEL CO.							
Principal Plac	e of Business	Mailing Address	<del>-1</del>	1			
4104W. HWY Kissimmee,		9208 COUNTRY BAY COURT ORLANDO, FL 32819 US					
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	O NOT WRITE	IN THIS SPA	CE	4. FEI Numbe	er		Applied For
				59-208	5608		Not Applicable
				5. Certificate	of Status Desired	□ <b>30</b>	3.75 Additional e Required
	6. Name and Address of Current Ro	egistered Agent					4:::::::::::::
MEHTA, HARBHAJAN 9208 COUNTRY BAY COURT ORLANDO, FL 32819				no	NOT W	RITE	Aldikalera en entenja Mandense en eldkild
				Property.		172.13666	
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	e named entity submits this statement for t tions of registered agent.	he purpose of changing its registe	ered office or register	red agent, or bot	th. in the State of Floria	orida. I am fan	niliar with, and accept
SIGNATURE				:			·
	Signature, typed or printed name of registered again, and	title if applicable " " " (NOTE Flegiste	rés Agent signature recurres	, when rensisting)		DATE	
FIL After M	E NOW!!! FEE IS \$150.00 ay 1, 2008 Fee will be \$550.00	Election Campaign Final     Trust Fund Contribution	ancing \$5	.00 May Be led to Fees	U0000 05/16/08	10924121 8-80060-	 019 150.00
10.	OFFICERS AND DI	RECTORS				aranan in in	
TITLE NAME	DP MEHTA, RANBIR S				X WHE		
STREET ADDRESS	9208 COUNTRY BAY CT						
TITLE	ORLANDO, FL S						
NAME	MEHTA, HARBHAJAN						
STREET ADDRESS	9208 COUNTRY BAY CT ORLANDO, FL					1.14 (10.44)	
THILE	ONE. WES, I'E						
NAME							
STREET ADDRESS CITY-ST-ZIP				DO	NOT W	RITE	
TITLE				in :	THIS SF	PACE	
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CITY-ST-ZIP						i i na na na 145. Na tatatat ji ligaji	in a di
TITLE NAME		13					
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CHY-ST-ZIP							
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12. Thereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119. 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 on an attachment with an address, with all other like empowered

SIGNATURE:

CITY - ST - ZIP

URE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECT

HARBHAJAN MEHTA

+/23/08

407-846-4714

Daysine Plone \*