FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT **1995**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED
95 APR 19 AM 1:18
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # F93000000175 (0)

1. Corporation Name
HOSPITALITY COMMUNICATIONS CORPORATION

Principal Place of Business	Mailing Address
14640 KESWICK STREET VAN NUYS CA 91405	14640 KESWICK STREET VAN NUYS CA 91405

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 01/14/1993
3a. Date of Last Report: 04/26/1994

2. Principal Place of Business
21: 1575 Spinnaker Dr
22 Suite, Apt. #, etc.: #204
23 City & State: VENTURA CA
24 Zip: CA 93001 25 Country: VENTURA

2a. Mailing Address
26: Same
27 Suite, Apt. #, etc.:
28 City & State:
29 Zip: 30 Country:

4. FEI Number: 95-4285394 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

THE PRENTICE-HALL CORPORATION SYSTEM INC.
1201 HAYS STREET
SUITE 105
TALLAHASSEE FL 32301

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City: FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

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

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	VPD	1.1 TITLE	Pres + Dir	☒ Change ☐ Addition
NAME	SLATON, STAN	1.2 NAME		
STREET ADDRESS	14640 KESWICK STREET	1.3 STREET ADDRESS	1575 Spinnaker Dr #204	
CITY-ST-ZIP	VAN NUYS CA	1.4 CITY-ST-ZIP	VENTURA CA 93001	
TITLE	PSD	2.1 TITLE	CEO + Dir	☒ Change ☐ Addition
NAME	DEARKLAND, JAMES R	2.2 NAME		
STREET ADDRESS	14640 KESWICK STREET	2.3 STREET ADDRESS	1575 Spinnaker Dr #204	
CITY-ST-ZIP	VAN NUYS CA	2.4 CITY-ST-ZIP	VENTURA CA 93001	
TITLE	T	3.1 TITLE		☒ Change ☐ Addition
NAME	JOHNSON, GREG	3.2 NAME		
STREET ADDRESS	14640 KESWICK STREET	3.3 STREET ADDRESS	1575 Spinnaker Dr #204	
CITY-ST-ZIP	VAN NUYS CA 91405	3.4 CITY-ST-ZIP	VENTURA CA 93001	
TITLE	VPD	4.1 TITLE		☒ Change ☐ Addition
NAME	HAIL, ROBERT	4.2 NAME		
STREET ADDRESS	14640 KESWICK STREET	4.3 STREET ADDRESS	3655 Loulu St	
CITY-ST-ZIP	VAN NUYS CA	4.4 CITY-ST-ZIP	Honolulu HI 96822	
TITLE		5.1 TITLE		☐ Change ☐ Addition
NAME		5.2 NAME		
STREET ADDRESS		5.3 STREET ADDRESS		
CITY-ST-ZIP		5.4 CITY-ST-ZIP		
TITLE		6.1 TITLE		☐ Change ☐ Addition
NAME		6.2 NAME		
STREET ADDRESS		6.3 STREET ADDRESS		
CITY-ST-ZIP		6.4 CITY-ST-ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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.

SIGNATURE: Greg Johnson Greg Johnson 4/13/95 805-650-6464
SIGNATURE AND TYPED OR PRINTED NAME OF MAKING OFFICER OR DIRECTOR — Title: CFO — Daytime Phone #

0401610 FN