FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT # 1. Corporation Name

F9300000175 (0)

HOSPITALITY COMMUNICATIONS CORPORATION

													ı
Principal Place of Business Mailing Address								I HARLING INIO INION DIVIN MATULA		1111 6818	14 H U II	19891 6111 1881	1
1575 SPINI 204		14640 KESWICK OTREET WAN NUYS CA 91405											
VENTURA CA 93001 US			- Saml			3. Date Incorporated or Qualified 01/14/1993							
2. Principal F	Place of Business		2a. Mailing A	ddress				4. FEI Number 95-4285394		-		pplied For ot Applicabl	le
Suite, Apt.	. #, etc.		Suite, Ap	ot. #, etc.				5. Certificate of Status Desired			.75	Additional equired	
City & Star		<u> </u>	27 City & Sta	ate				6. Election Campaign Financing				May Be	{
23		ļ.	28					Trust Fund Contribution				to Fees	
Zip Gountry			Zip Country			ntry		8. This corporation has liability for intengible tax under s 199.032, Florida Statutes Yes No				\dashv	
24	[25]			30									
	9. Name and A	ddress of Current Re	gistered Age	ent				10. Name and Address of New	Registered.	Agent			
						81	Name						
THE PRENTICE-HALL CORPORATION SY 1201 HAYS STREET			TEM INC.	EM INC.		82	Street Add	lress (P.O. Box Number is Not Accept	able)				
						B3				···-·			_
SUITE 105						83							
IALLA	NHASSEE FL 3230	1				84	City	Maria Cara Cara Cara Cara Cara Cara Cara	FL	85	Ζιρ	Code	
SIGNATURE	,	bligations of, Section 6	tte if applicacie			Agent	signature requin	ed wher reinstaling)	DATE			O IN 10	
12.	T	OFFICERS AND DI		DELETE	13.	7		ADDITIONS/CHANGES TO O		Char		Addition	
TITLE	PD SLATON, STA	ANI		DECETE	1. 1 TI				Ł		iye	Addition	
NAME STREET ADDRESS		KER DR #204			1.2 NA		ADDRESS						
CITY-ST-ZIP	VENTURA CA				1.4 CI								
TITLE	CEOD	<u> </u>		DELETE	2 1 TI		1-211]	Char	nge	Addition	
NAME	DEARKLAND,	JAMES R			2 2 NA	ME							
STREET ADDRESS		KER DR #204			2 3 ST	REET.	ADDRESS						
CITY-ST-ZIP	VENTURA CA	\			2 4 CI	[Y - S]	r-ZiP						
TITLE	T			DELETE	3. 1 TI	TLE			[Char	nge	Addition	١
NAME	DEARKLAND,				3 2 NA								
STREET ADDRESS		KER DR #204			1		ADDRESS						
CITY-ST-ZIP	VENTURA CA	<u> </u>	<u>من</u>	DELETE	4. 1 TI		1 - ZIP			Char		☐ Addition	
T:TLE NAME	VPD Hail, Rober	ıτ	54	Victor	4. 111 4.2 NA				L		igc		
STREET ADDRESS							ADDRESS						
CITY-ST-ZiP	HONOLULU				4.4 CI								
TITLE	TIONOLOLO I			DELETE	5. 1 TI					Char	nge	Addition	
NAME					5 2 NA								
STREET ADDRESS	;						ADORESS.						
Crty-St-ZIP					5 4 CI	IY - S1	I - ZIP						
TITLE				DELETE	6. 1 1	TLE			Ī	Char	nge	Addition	١ _
NAME					6.2 NA	ME							
STREET ADDRESS	; [6351	REFI	ADDRESS						
CITY . CT . 7(0)	1				6400	IV. C1	1.70						

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 altayament with an address.

SIGNATURE:

GNATURE AND WPED OR PHINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/9/96

805-650-646/