## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F93000001428

Entity Name: HOSPITALITY INTERNATIONAL, INC.

FILED Mar 03, 2009 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 1726 MONTREAL CIRCLE TUCKER, GA 30084 **Current Mailing Address: New Mailing Address:** 1726 MONTREAL CIRCLE TUCKER, GA 30084 FEI Number: 62-1017020 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 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. SIGNATURE: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: VPQA ( ) Delete () Change () Addition BLOODWORTH, JAMES Name: Name: 3109 COLONIAL WAY Address: Address: City-St-Zip: ATLANTA, GA 30341 City-St-Zip: Title: ( ) Delete Title: () Change () Addition Name: PATEL R C Name: 1726 MONTREAL CIRCLE Address: Address: City-St-Zip: TUCKER, GA 30084 City-St-Zip: Title: Title: ( ) Delete () Change () Addition KIRAN, SHAH J Name: Name: 1726 MONTREAL CIRCLE Address: Address: City-St-Zip: TUCKER, GA 30084 City-St-Zip: Title: () Delete Title: () Change () Addition FOY, AMY D Name: Name: Address: 1726 MONTREAL CIR. Address: City-St-Zip: TUCKER, GA 30084 City-St-Zip: Title: ( ) Delete Title: () Change () Addition MAHESH, DESAI Name: Name: 1726 MONTREAL CIR. Address: Address: City-St-Zip: TUCKER, GA 30084 City-St-Zip: Title: ( ) Delete Title: (X) Change ( ) Addition SHULER, ANDREW W Name: Name: CHRIS, GUIMBELLOTT W 1726 MONTREAL CIR. 1726 MONTREAL CIR. Address: Address: City-St-Zip: TUCKER, GA 30084 City-St-Zip: TUCKER, GA 30084

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JIM BLOODWORTH VP 03/03/2009