FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

Apr 24 1998 8:00am

Secretary of State

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F9300002566 (8)

MOTEL CONTRACTORS, INC.

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Principal Place of Business Mailing Address						T LOUDING BEEN ANIMA CELER BREEN MUSIC	Agidi Abidi atdıb ili		IIO BAIL IBBI
710 ROUTE 46 EAST 210 FAIRFIELD NJ 07004		710 ROUTE 46 EAST 210 FAIRFIELD NJ 07004				DO NOT WRI	TE IN THIS SPA	ACF	
US		US		<u> </u>	3. Date Incorporated or Qualified				
"		•••			-	06/02/1993			
2. Principal P	lace of Business	2a. Mailing Address				4. FEI Number		Ar	oplied For
21		26			22-3173070		No	ot Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.						\$8.75	Additional
22		27				5. Certificate of Status Desired		Fee Re	aquired
City & State		City & State			1	6. Election Campaign Financing	_	\$5.00	May Be
23		28			Trust Fund Contribution		Added		
Zip Country		}¬ '	Zip Country			8. This corporation owes or has			
24	25	29	30			Personal Property Tax due Ju 0. Name and Address of New			No
	9, Name and Address of Curr		81	Name		U. Name Bild Address of New	Jegistered Ağı	3 111	
THE PRENTICE-HALL CORPORATION SYSTEM INC.			["						
1201 MAYS STREET			82	Street	l Address	(P.O. Box Number is Not Accep-	able)		
	HTE 105		83	 					
TALLAHASSEE FL 32301				<u> </u>					
			84	City			FL	85 Zip (Code
11. Pursuant	to the provisions of Sections 607.0	1502 and 607, 1508. Florida Statu	tes the abov	l e-named	d corpora	tion submits this statement for the		anging if	ts registered
office or r	registered agent, or both, in the Standard militar with, and accept the ob-	ite of Florida. Such change was	authorized b	y the con					
•	im lamiliar with, and accept the ob	iiganons or, section 607.0505, Fi	ionoa statute	S.					
SIGNATURE	Signature, typed or printed frame of registered	agent and title Lapplicable (NO	IE: Registered Ag	ont signature	re required wi	hen reinstating)	DATE		
12.		ND DIRECTORS	13.			ADDITIONS/CHANGES TO OF	FICERS AND D	IRECTOF	IS IN 12
TITLE	PT	DELETE	1.1 TITLE	1.1 TITLE			Ø.	Change	Addition
NAME			1.2 NAME		"	. •	•	`	
STREET ADDRESS	710 ROUTE 46 EAST	1.3 STF		T ADDRESS					
CITY-ST-ZIP			1.4 CITY -	ST-ZIP					
TITLE	-		2.1 TITLE		IV S	SD	QF	Change	Addition
NAME	TAUB, MELVIN S		2.2 NAME		'		•	`	
STREET ADDRESS 710 ROUTE 46 EAST			2 3 STREET ADDRESS						
CITY-ST-ZIP	FAIRFIELD NJ		2 4 CITY-ST-ZIP		ļ				
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NAME			3.2 NAME						ļ
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TITLE		☐ DETETE	4.1 TITLE		1		L	Change	Addition
NAME	1		4. 2 NAME						
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CITY-ST-ZIP TITLE			4.4 CITY - 5.1 TITLE	51 - ZIP	 			Change	Addition
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NAME etdeet annouses				L VDDDLec					
STREET ADDRESS				FADDRESS	1				
CITY-ST-ZIP TITLE			5.4 CITY -: 6.1 TITLE	51 - ZIP	 			Change	Addition
NAME			6.2 NAME				<u>_</u>	o , congo	
STREET ADDRESS				I ADDRESS					
SINEE! ADDRESS		_	D.3 5 IMEE	AUURESS	}				•

14. 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 annual report or supplied ental annual report is true and accurate and that my signature shall have the same logal effect as if made under oath; that I am an officer or director of the corporation or the receiver or this true and accurate and that my signature shall have the same logal effect as if made under oath; that I am an officer or director of the corporation or the receiver or this true and accurate and that my signature shall have the same logal effect as if made under oath; that I am an officer or director of the corporation or the receiver of this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or an an all an interest with an address.