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

CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS **FILED**

Mar 25 1998 8:00am

Secretary of State

1998

DOCUMENT #
1. Corporation Name F9300005805 (7)

RESORT INVESTORS LIMITED INC.

Principal Place of Business Mailing Address						- C 1006/055 EIIO LOIDO IIIII ADIII DOIII DOIII	JUTEL WOEDT WILLIAM		
C/O RAFAEL HOTELS LIMITED. USA 128 EAST 36TH STREET NEW YORK NY 10016 C/O RAFAEL HOTELS I 126 EAST 36TH STREET NEW YORK NY 10016 NEW YORK NY 10016						DO NOT WRITE IN THIS SPACE			
						3. Date Incorporated or Qualified 12/22/1993			
2. Principal Place of Business 2a. Mailing Address						4. FEI Number			lied For
26 Suite, Apt. #, etc. Suite, Apt. #, etc.						22-2953112	60	_	Applicable
22 27 City & State City & State						5. Certificate of Status Desired See Required			
23	0	28				6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees			
Zip	Country	Zip	1 · · · · · · · · · · · · · · · · · · ·			8. This corporation owes or has paid to		-	
24	25 29					Personal Property Tax due June 30. Yes No			
	9. Name and Address of Curr	ent Registered Agent				10. Name and Address of New Regis	tered Agent		
CORPORATION SERVICE COMPANY				1	Name				
1201 HAYS STREET			8	2	Street Addre	ss (P.O. Box Number is Not Acceptable)			
TALLAHASSEE FL 32301			8						
			8	•					
			8-	1	City		E1 85	Zip Co	ode
11 Dureuent t	to the provisions of Sections 607 Af	.02 and 607 1509 Florida Plat	don the obe	<u></u>	named sares	oration submits this statement for the purp	FL 65	laa ita i	- anintarad
office or re	ealstered agent, or both, in the Sta	te of Florida. Such change was	authorized b	w t	the corporation	on's board of directors. I hereby accept the	ne appointmer	nt as re	registered gistered
agent. La	m familiar with, and accept the obli	gations of, Section 607.0505, F	lorida Statute	98.					
SIGNATURE	Signature typed or printed name of registered a	own and life if amplicable (NC	III- Registered A	and	t signature required	Number reinstalings	DATE		
12.		ND DIRECTORS	13.		t alguature required	ADDITIONS/CHANGES TO OFFICER		TORS	IN 12
TITLE	D	DELETE	1.1 TITLE				☐ Cha		Addition
NAME	GRAFE, JENS		1.2 NAME						
STREET ADDRESS	126 EAST 36TH STREET		1.3 STREE	ΤA	DDRESS				
CITY - ST - ZIP	NEW YORK NY 10016			ST-	- ZIP				
TITLE		DELETE	2.1 TiTLE				Cha	nge	Addition
NAME			2.2 NAME						
STREET ADDRESS			2.3 STREE	TA	ODRESS				
CITY+\$T-ZIP				\$1	- ZIP				
TITLE	☐ DELETE						☐ Cha	nge (Addition
NAME			3.2 NAME						
STREET ADDRESS			3.3 STREE						
CITY - ST - ZIP TITLE	DELETE			ST	- ZIP		☐ Cha	T	Addition
NAME								iiRo (Add(801)
STREET ADDRESS			4. 2 NAM 4.3 STREE		DOBESS				
CITY-ST-ZIP			4.3 STREE						
TITLE	DELETE			J1 -	2.11		Char	nge [Addition
NAME			5.2 NAME				_		_
STREET ADDRESS			5.3 STREE	T AE	DORESS				
CITY-ST-ZIP			5.4 CITY-	ST-	ZIP				
TITLE		☐ DELETE	6.1 TITLE				Chai	nge [Addition
NAME			6.2 NAME						
STREET ADDRESS			6.3 STREE	I AE	DDRESS				
CITY-ST-ZIP			6.4 CITY-						
indicated of officer or o	on this annual report or supplemen	tal annual report is true and ac- ceiver or trustee empowered to	curate and th	at	my signature	ection 119.07(3)(i), Florida Statutes. I furti shall have the same legal effect as if ma ed by Chapter 607, Florida Statutes; and	ide under oath	r; that I	am an