

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **F95000000250**

1. Entity Name
RAFAEL HOTELS LIMITED USA CORPORATION

FILED

02 APR -8 AM 11:36

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



Principal Place of Business
126 E. 36TH ST.
NEW YORK NY 10016

Mailing Address
126 E. 36TH ST.
NEW YORK NY 10016

2. Principal Place of Business
1775 Broadway

3. Mailing Address
1775 Broadway

Suite, Apt. #, etc.
Suite 310

Suite, Apt. #, etc.
Suite 310

City & State
New York, NY

City & State
New York, NY

Zip
10019

Country
U.S.A.

Zip
10019

Country
U.S.A.

DO NOT WRITE IN THIS SPACE

4. FEI Number **13-3394524**

Applied For
 Not Applicable

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

CORPORATE ACCESS INC.
236 E. 6TH AVENUE
TALLAHASSEE FL 32303

Name

Street Address (P.O. Box Number is Not Acceptable)

City **FL** Zip Code

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

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)

FILE NOW!!! FEE IS \$150.00
After May 1, 2002 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE Delete
NAME **P HULTNER, WOLFGANG K**
STREET ADDRESS **345 CALIFORNIA STREET, STE. 1250**
CITY-ST-ZIP **SAN FRANCISCO CA 94104**

TITLE Change Addition
NAME **Director, President**
STREET ADDRESS **Hultner, Wolfgang K.**
CITY-ST-ZIP **345 California Street, Ste. 1250**
San Francisco, CA 94104

TITLE Delete
NAME **T LEE, SHERRY**
STREET ADDRESS **345 CALIFORNIA STREET, STE. 1250**
CITY-ST-ZIP **SAN FRANCISCO CA 94104**

TITLE Change Addition
NAME **Director, Treasurer**
STREET ADDRESS **Lee, Sherry**
CITY-ST-ZIP **345 California Street, Ste. 1250**
San Francisco, CA 94104

TITLE Delete
NAME **S LOKE, KIT C**
STREET ADDRESS **101 SECOND STREET, STE. 1800**
CITY-ST-ZIP **SAN FRANCISCO CA 94105**

TITLE Change Addition
NAME **300005419798**
STREET ADDRESS **-05/02/02--01020--009**
CITY-ST-ZIP ******150.00 ****150.00**

TITLE Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE Change Addition
NAME **Director**
STREET ADDRESS **Witt, John R.**
CITY-ST-ZIP **281 Gloucester Road, 7th Fl**
Causeway Bay, Hong Kong

TITLE Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE Change Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE Change Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **Wolfgang K. Hultner** **4/4/02** **(415) 369-7110**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR **Sec.** Date Daytime Phone #

CR2E034 (9/01)