

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

FILED  
Mar 19 1998 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **F95000004108 (5)**

1. Corporation Name  
**REGENT HOSPITALITY CORPORATION**

Principal Place of Business  
**EXECUTIVE OFFICE BUILDING  
1000 ZENITH AVENUE  
FT. MILL SC 29715  
US**

Mailing Address  
**EXECUTIVE OFFICE BUILDING  
1000 ZENITH AVENUE  
FT. MILL SC 29715  
US**



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

**08/24/1995**

4. FEI Number

**57-1029135**

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional  
Fee Required**

6. Election Campaign Financing  
Trust Fund Contribution ☐

**\$5.00 May Be  
Added to Fees**

8. This corporation owes or has paid the current year Intangible  
Personal Property Tax due June 30. ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

**WHITEHEAD, KAREN  
200 S ORANGE AVE #2300  
ORLANDO FL 32801**

10. Name and Address of New Registered Agent

81 Name  
82 Street Address (P.O. Box Number is Not Acceptable)  
83  
84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	DC	<input type="checkbox"/> DELETE
NAME	CHAI, LAWRENCE	
STREET ADDRESS	3000 HERITAGE PKWY	
CITY-ST-ZIP	FT MILL SC 29715	
TITLE	DP	<input type="checkbox"/> DELETE
NAME	KHET, KOK YIN	
STREET ADDRESS	3000 HERITAGE PKWY	
CITY-ST-ZIP	FT MILL SC 29715	
TITLE	DP	<input type="checkbox"/> DELETE
NAME	LOY, YET-KING	
STREET ADDRESS	3000 HERITAGE PKWY	
CITY-ST-ZIP	FT MILL SC 29715	
TITLE	S	<input type="checkbox"/> DELETE
NAME	SIEW, WOH	
STREET ADDRESS	3000 HERITAGE PKWY	
CITY-ST-ZIP	FT MILL SC 29715	
TITLE	S	<input type="checkbox"/> DELETE
NAME	YAM, L C ANGIE	
STREET ADDRESS	3000 HERITAGE PKWY	
CITY-ST-ZIP	FT. MILL SC	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(l), 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 attachment with an address.

SIGNATURE:

ANGIE YAM, VP

3/12/98

803-547-8118

CR2E034 (10/97)