FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00 **FILED** FLORIDA DEPARTMENT OF STATE Jan 29 1998 8:00am CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State 1998 DIVISION OF CORPORATIONS F97000003070 (6) DOCUMENT # FRENCH QUARTER SUITES, INC. Principal Place of Business Mailing Address 1201 W. PEACHTREE STREET. SUITE 2800 1201 W. PEACHTREE STREET. SUITE 2800 ATLANTA GA 30309 ATLANTA GA 30309 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 06/12/1997 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 26 58-2177661 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 28 Trust Fund Contribution Added to Fees Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. 24 25 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 CORPORATION SERVICE COMPANY 1201 HAYS STREET Street Address (P.O. Box Number is Not Acceptable) TALLAHASSEE FL 32301-2525 83 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 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE TITLE Change Addition 1.1 TITLE NAME BEN-ZUR, RAANAN 1.2 NAME STREET ADDRESS 1201 WEST PEACHTREE STREET, SUITE 2800 1.3 STREET ADDRESS ATLANTA GA 30309 CETY - ST - ZEF 1.4 CITY - ST - ZIP DELETE TITLE 2.1 TITLE Change Addition PYLES, CHARLES T NAME 2.2 NAME 1201 W. PEACHTREE STREET, SUITE 2800 STREET ADDRESS 2.3 STREET ADDRESS ATLANTA GA 30309 CITY-ST-ZIP 2. 4 CITY-ST-ZIP DELETE TITLE Change Addition 3.1 TITLE NAME FISHER, SCOTT A 3.2 NAME 1201 W. PEACHTREE STREET, SUITE 2800 STREET ADDRESS 3.3 STREET ADDRESS ATLANTA GA 30309 CITY - ST - ZIP 3.4. CITY-ST-ZIP □ DELETE TITLE 4.1 TITLE Change Addition NAME STREET ADDRESS 4.3 STREET ADDRESS

14. I hereby certify that the information supplied with this filling 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 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.

4.4 CITY-ST-ZIP

5 3 STREET ADDRESS

6 3 STREET ADDRESS

5.4 CITY - ST - ZIP

51 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME

SIGNATURE:

CITY - ST- ZIP

STREET ADORESS

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

TITLE

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REQUIRED COH Fisher

DELETE

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404-873-

Change

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Addition

Addition