

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

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F97000005451 (6)

1. Corporation Name

SERVICO MARYLAND, INC.

APPROVED
AND
FILED

98 APR 30 PM 1:51

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



Principal Place of Business

1601 BELVEDERE RD.
WEST PALM BEACH FL 33406

Mailing Address

1601 BELVEDERE RD.
WEST PALM BEACH FL 33406

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

10/16/1997

4. FEI Number

58-2348773

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$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

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 Suite 501S
City & State

23 Zip

24 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 Suite 501S
City & State

28 Zip

29 Country

30

9. Name and Address of Current Registered Agent

RUFFIN, ROBERT D
1601 BELVEDERE RD.
WEST PALM BEACH FL 33406

10. Name and Address of New Registered Agent

81 Name

CT Corporation System

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

1200 South Pine Island Road

83

84 City

Plantation

FL

85 Zip Code

33324

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 made 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 607.1508, Florida Statutes.

SIGNATURE

Connie Bryan

SPECIAL ASSISTANT SECRETARY

4/30/98

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 CEO
NAME BUDDMEYER, DAVID
STREET ADDRESS 1601 BELVEDERE RD.
CITY-ST-ZIP WEST PALM BEACH FL 33406

TITLE VS
NAME RUFFIN, ROBERT D
STREET ADDRESS 1601 BELVEDERE RD.
CITY-ST-ZIP WEST PALM BEACH FL 33406

TITLE V
NAME KNIGHT, WARREN M
STREET ADDRESS 1601 BELVEDERE RD.
CITY-ST-ZIP WEST PALM BEACH FL 33406

TITLE TAS
NAME HALE, PHILLIP
STREET ADDRESS 1601 BELVEDERE RD.
CITY-ST-ZIP WEST PALM BEACH FL 33406

TITLE AS
NAME DIAZ, CHARLES M
STREET ADDRESS 1601 BELVEDERE RD.
CITY-ST-ZIP WEST PALM BEACH FL 33406

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE P/CEO
1.2 NAME David Buddemeyer
1.3 STREET ADDRESS 1601 Belvedere Road, Suite 501S
1.4 CITY-ST-ZIP West Palm Beach, FL 33406

2.1 TITLE V/S
2.2 NAME Charles M. Diaz
2.3 STREET ADDRESS 1601 Belvedere Road, Suite 501S
2.4 CITY-ST-ZIP West Palm Beach, FL 33406

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE
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)(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.

SIGNATURE

Charles M. Diaz

CR2E034 (10/97)