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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # F9800006721

ORECK HOSPITALITY INC.

FILED Mar 01, 1999 8:00 am Secretary of State

03-01-1999 90006 046 ***150.00



Mailing Address Principal Place of Business 100 PLANTATION RD 100 PLANTATION RD NEW ORLEANS LA 70123 NEW ORLEANS LA 70123 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed 12/09/1998 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For Not Applicable 72-1337426 21 26 \$8.75 Additional Suite, Apt. #, etc. Suite, Apt. #, etc. 5. Certifcate of Status Desired \Box Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be П Trust Fund Contribution Added to Fees 23 28 Country Zip Country Zip 8. This corporation owes the current year Intangible □No ☐ Yes 30 Personal Property Tax. 24 25 29 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent C T CORPORATION SYSTEM 82 Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324 83 84 85 Zip Code City 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) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 12. 13. ☐ DELETE Vice President/ Asst Se . Change 1.1 DILE TITLE LAGRECA, TONY 1.2 NAME NAME Stanley W. Eilers 100 PLANTATION RD 1.3 STREET ADDRESS 100 Plantation Rd New Orleans, LA 70123 STREET ADDRESS **NEW ORLEANS LA 70123** 1.4 CITY-ST-ZIP CITY-ST-ZIP Addition ☐ DELETE 21 TITLE Change TITLE ORECK, DAVID 22 NAME NAME 100 PLANTATION RD 2.3 STREET ADDRESS STREET ADDRES **NEW ORLEANS LA 70123** 2. 4 CITY-ST-ZIP CITY-ST-ZIP Addition ☐ DELETE ☐ Change TITLE VAS 3.1 TITLE

ORECK, BRUCE 3.2 NAME NAME 100 PLANTATION RD 3.3 STREET ADDRESS STREET ADDRE **NEW ORLEANS LA 70123** CITY-ST-ZIP 3.4. CITY-ST-ZIP ☐ DELETE ☐ Change ☐ Addition 4.1 TITLE TITLE ORECK, MARSHALL 4 2 NAME NAME 100 PLANTATION RD 4.3 STREET ADDRESS STREET ADORE **NEW ORLEANS LA 70123** 4.4 CITY-ST-ZIP CITY-ST-ZIP Addition DELETE Change 5.1 TITLE TITLE 52 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP 61 TITLE ☐ Addition ☐ DELETE Change TITLE 6.2 NAME NAME **6.3 STREET ADDRESS** STREET ADDRESS 64 CITY-ST-ZIP 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 front as required by Chapter 109. Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other light 1992.

SIGNATURE:

OREGNOSSITATIONS UNES

Asst Sec. 504-731-7268

CR2E034 (11/98)