

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 29, 2006 08:00 A
Secretary of State

DOCUMENT # F99000005081

1. Entity Name
WW LODGING, INC.



Principal Place of Business
**1973 FRIENDSHIP DRIVE
EL CAJON, CA 92020**

Mailing Address
**5847 SAN FELIPE
4650
HOUSTON, TX 77057**



07182006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
95-1503436

Applied For
Not Applicable

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

- 6. Name and Address of Current Registered Agent -

**NATIONAL CORPORATE RESEARCH, LTD., INC.
515 E. PARK AVE.
TALLAHASSEE, FL 32301**

**DO NOT WRITE
IN THIS SPACE**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

000000575611

08/29/06-80003-019 \$550.00

**FILE NOW!!! FEE IS \$550.00
Due by September 6, 2006
CK#100247**

9. Election Campaign Financing
Trust Fund Contribution. ☐

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

10. OFFICERS AND DIRECTORS

TITLE **V**
NAME **WILLIAMS, TODD**
STREET ADDRESS **85 BROAD STREET, 19TH FLOOR**
CITY-ST-ZIP **NEW YORK, NY 10004**

TITLE **P**
NAME **NEIDICH, DANIEL M**
STREET ADDRESS **120 EAST END AVENUE, APT. 7A**
CITY-ST-ZIP **NEW YORK, NY 10028**

TITLE **V**
NAME **MANGALJI, MOEZ**
STREET ADDRESS **2 SMITHDALE ESTATES**
CITY-ST-ZIP **HOUSTON, TX 77024**

TITLE **S**
NAME **NAUGHTON, KEVIN D**
STREET ADDRESS **44 AMHERST ROAD**
CITY-ST-ZIP **PORT WASHINGTON, NY 11050**

TITLE **T**
NAME **WEIL, DAVID M**
STREET ADDRESS **19 EAST 80TH STREET, APT. 8B**
CITY-ST-ZIP **NEW YORK, NY 10021**

TITLE **AS**
NAME **THOWFEEK, MOHAMED**
STREET ADDRESS **5847 SAN FELIPE #4650**
CITY-ST-ZIP **HOUSTON, TX 77057**

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Mohamed Thowfeek. 7/27/06 (713) 782-9100

Date

Daytime Phone #