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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997
DOCUMENT # G48274

MOTELS OF FLORIDA REALTY, INC.

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Apr	10	1997	8:00am
Se	cre	tary o	f State



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	ace of Business	Mailing Addr				, 1921/11 part 4:42 is 1214 is 217 (4:21 4:1	v. grait 81814 81		47811 7487
748 LAGOON NORTH PALI	N DR M BEACH FL 33408	748 LAGOON NORTH PALM	DR BEACH FL 334	108-4234					
						3. Date Incorporated or Qualified 07/11/1983		te of Last 11/1996	
2. Principal 21	Place of Business	2a. Mailing A	ddress			4. FEI Number 59-2317096			Applied For
Suite, Ar	it # etc	Suite, Apr	t # etc			39-23 17 090		·	Not Applicable Additional
2	n. #, 000	27	ι. π, οιο.			5. Certificate of Status Desired			Required
City & St	ale	City & Sta	ate		1211	6. Election Campaign Financing	_	\$5.00	May Be
3]	Country	28 Zip		Country		Trust Fund Contribution			d to Fees
Ζφ 4	25	29	36	-n '	'	B. This corporation has liability for Florida Statutes	intangible i Yes		s. 199.032,
<u> </u>	9. Name and Address of Cur			<u> </u>		10. Name and Address of New R			
M	CINTOSH, NANCY			81	Name			· 	····
	18 LAGOON DR			82	Swoot Ado	dress (P.O. Box Number is Not Accepta	blo)		
NO	ORTH PALM BEACH FL 33408			102	Silect Auc	diess (F.O. Box Humbel is Hut Accepte	inie)		
				63					
				84	City			85 Zir	o Code
					<u> </u>	rporation submits this statement for the attion's board of directors. I hereby according	<u>FL</u>		
SIGNATURE	Signature, tysied or prinsid name of ingistered OFFICERS	dagent and tile if applicable AND DIRECTORS	(NOTE F	ingistared Ag	eni signalure requ	ulred when reinstating) ADDITIONS/CHANGES TO OFFI	DATE CERS AND	DIRECTO	DRS IN 12
						ADDITIONS/CHANGES TO OFF	OLIN AND		
	PST NAMOV		DELETE	1.1 TITLE		ADDITIONS/GHANGES TO GITT	OLIO AITO	☐ Change	
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14. Too 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.

CICNIATIIDE

IGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/3/97 776-0080