

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Office of Secretary
Secretary of State
Tallahassee, Florida 32399-0001

APPROVED
AND
FILED

DOCUMENT # **H01338**

(3)

51 MAY - 11 9:15

SONESTA SOHO INVESTMENT CORP.

RECEIVED STATE
TALLAHASSEE, FLORIDA

JOHN HANCOCK TOWER
200 CLARENDON ST.
BOSTON MA 02116

JOHN HANCOCK TOWER
200 CLARENDON ST.
BOSTON MA 02116

DO NOT WRITE IN THIS SPACE

3. Date of Incorporation or Qualification 04/24/1984	3a. Date of Last Report 02/21/1994
4. Filing Number 59-2421633	Applied For ☐ Not Applicable ☐
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐	\$5.00 May Be Added to Fees
8. To be completed by the filer for corporations only (see instructions) Florida filer: ☐ Yes ☒ No	

2. Filing Agent's Name 21	2a. Filing Agent's Name 26
2b. Filing Agent's Address 22	2c. Filing Agent's Address 27
2d. Filing Agent's City 23	2e. Filing Agent's City 28
2f. Filing Agent's State 24	2g. Filing Agent's State 29
2h. Filing Agent's Zip 25	2i. Filing Agent's Zip 30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324

81. Name	
82. Street Address (P.O. Box Number is Not Acceptable)	
83. City	
84. State	FL
85. Zip Code	

11. Pursuant to the provisions of Sections 607.01(1)(b) and 607.01(2)(b), Florida Statutes, the above filer hereby certifies that the information furnished herein is true and correct, and that the filer is duly qualified to act as the registered agent for the corporation. I hereby accept the appointment as registered agent for the corporation.

SIGNATURE

12. OFFICERS AND DIRECTORS	13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS
CD NAME: SONNABEND, ROGER P. STREET ADDRESS: 200 CLARENDON STREET CITY: BOSTON MA	1. NAME: ☐ Change ☐ Addition
PD NAME: SONNABEND, STEPHEN STREET ADDRESS: 350 OCEAN DRIVE CITY: KEY BISCAYNE FL	2. NAME: ☐ Change ☐ Addition
VSD NAME: SONNABEND, PETER J. STREET ADDRESS: 200 CLARENDON STREET CITY: BOSTON MA	3. NAME: ☐ Change ☐ Addition
VT NAME: VAN RIEL, A. J. STREET ADDRESS: 200 CLARENDON STREET CITY: BOSTON MA	4. NAME: ☐ Change ☐ Addition
S NAME: RAKOUSKAS, DAVID A. STREET ADDRESS: 200 CLARENDON STREET CITY: BOSTON MA	5. NAME: ☐ Change ☐ Addition
NAME: STREET ADDRESS: CITY: STATE: ZIP:	6. NAME: ☐ Change ☐ Addition

14. I, the filer, certify that the information supplied with this filing is completely true and correct, and that the filer is duly qualified to act as the registered agent for the corporation. I hereby certify that the information indicated on this annual report or supplemental annual report is true and correct, 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 designated to receive this report as required by Chapter 607, Florida Statutes, and that my name appears on Block 12 or Block 13 of this report, or on the official report with an addition.

SIGNATURE:

David Rakouskas
David Rakouskas
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER ON DIRECTOR

5/10/95

(617) 421-5453