

2002 UNIFORM BUSINESS REPORT (UBR)**DOCUMENT # H01338**

1. Entity Name

SONESTA MIAMI BEACH HOTEL COMPANY, INC.**FILED**
Feb 10, 2002 8:00 am
Secretary of State

02-10-2002 90016 049 ***150.00

05/19/15 AT

Principal Place of Business

**200 CLARENDON ST.
41ST FL
BOSTON MA 02116**

Mailing Address

**200 CLARENDON ST.
41ST FL
BOSTON MA 02116**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-2421633

Applied For

Not Applicable

Zip

Country

Zip

Country

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

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

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

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐**FILE NOW!!! FEE IS \$150.00**
After May 1, 2002 Fee will be \$550.00
Make Check Payable to Department of State10. Election Campaign Financing
Trust Fund Contribution. ☐**\$5.00** May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE **CPD** ☐ Delete
NAME **SONNABEND, ROGER P.**
STREET ADDRESS **200 CLARENDON ST. 41ST FL**
CITY-ST-ZIP **BOSTON MA 02116**TITLE **VSD** ☐ Delete
NAME **SONNABEND, PETER J.**
STREET ADDRESS **200 CLARENDON ST. 41ST FL**
CITY-ST-ZIP **BOSTON MA 02116**TITLE **VTD** ☐ Delete
NAME **VAN RIEL, BOY A**
STREET ADDRESS **200 CLARENDON ST. 41ST FL**
CITY-ST-ZIP **BOSTON MA 02116**TITLE **AS** ☐ Delete
NAME **RAKOUSKAS, DAVID A**
STREET ADDRESS **200 CLARENDON ST. 41ST FL**
CITY-ST-ZIP **BOSTON MA 02116**TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐ Addition
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STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

13. 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 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Peter J. Sonnabend, VP & Sec.

1/15/02

(617) 421-5450

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/01)