

**2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Jan 22, 2003 8:00 am
Secretary of State

01-22-2003 90047 045 ***150.00

DOCUMENT # H01338

1. Entity Name
SONESTA COCONUT GROVE, INC.



Principal Place of Business
~~200 CLARENDON ST X~~
~~430 FLX~~
BOSTON MA 02116

Mailing Address
~~200 CLARENDON ST X~~
~~X15X FLX~~
BOSTON MA 02116



2. Principal Place of Business
116 Huntington Ave., Floor 9
Suite, Apt. #, etc.

3. Mailing Address
116 Huntington Ave., Floor 9
Suite, Apt. #, etc.

CHECK HERE IF MAKING CHANGES

City & State
Boston, MA

City & State
Boston, MA

Zip
02116

Country

Zip
02116

Country

4. FEI Number **59-2421633**

Applied For
 Not Applicable

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

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

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	CPD SONNABEND, ROGER P. 200 CLARENDON ST X 1ST FL BOSTON MA 02116	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VSD SONNABEND, PETER J. 200 CLARENDON ST X 1ST FL BOSTON MA 02116	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VTD VAN RIEL, BOY A 200 CLARENDON ST X 1ST FL BOSTON MA 02116	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS RAKOUSKAS, DAVID A 200 CLARENDON ST X 1ST FL BOSTON MA 02116	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	116 Huntington Avenue, Floor 9 Boston, MA 02116	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: SIGNATURE REQUIRED Peter J. Sonnabend, VP & Sec. 1/10/03
Date (617) 421-5450

CR2E034 (10/02)