Mar 30, 1999 8:00 am Secretary of State

03-30-1999 90009 028 ***150.00

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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # H75790

1. Corporation Name

HOTEL CONCEPTS IN CONSTRUCTION, INC.

HOTEL V		ion, ino					
Principal Place	e of Business	Mailing Address		_	1 (40(4)) 6()) (600) 6()() (800)	,	
5311 SW 88TH TERR 5311 SW 88TH TERR COOPER CITY FL 33328 US US					DO NOT WRITE II	N THIS SPACE	
US		03			3. Date Incorporated or Qualifed 09/12/1985	~ <u>_</u>	- N
2. Principal P	lace of Business	2a. Mailing Address			4. FEI Number		pplied For
21		26			59-2610096	No	ot Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certifcate of Status Desired	*	\$8.75 Additional Fee Required	
City & Stat	е	City & State			6. Election Campaign Financing	\$5.00	May Be
23		28			Trust Fund Contribution	Added	to Fees
Zip	Country	Zip	Country		8. This corporation owes the current y		
24	25	29 30	0		Personal Property Tax.	Yes	□No
	9. Name and Address of Current	Registered Agent			10. Name and Address of New Regi	stered Agent	
1400	CER DEPORAL!	•	81	Name	`	•	
MERCER, DEBORAH L 5311 SW 88TH TERR			82	Street Add	ress (P.O. Box Number is Not Acceptable))	- /
COC	PER CITY FL 33328		83				
	•		84	City		FL 85 Zip	Code
SIGNATURE	Signature, typed or printed name of registered agen OFFICERS AN	D DIRECTORS	13.	t signature require	ad when reinstating) ADDITIONS/CHANGES TO OFFICE	DATE ERS AND DIRECTO Change	ORS IN 12
TITLE	PD	☐ DELETE	1.1 TITLE			☐ Change	☐ Addition
NAME	MERCER, RICKERT A.	÷	1.2 NAME	1			
STREET ADDRESS	5311 SW 88TH TERR		1.3 STREET				
CITY-ST-ZIP	COOPER CITY FL	F7	1.4 CITY-ST	Γ-ZIP			Addition
TITLE	D	DELETE .	2.1 TITLE			☐ Change	Magnigon
NAME	MERCER, DEBORAH L.	المراجعة ا	2.2 NAME		والمرافع المراجع المحال للمال		
STREET ADDRESS	5311 SW 88TH TERR		2.3 STREET		·		
CITY-ST-ZIP	COOPER CITY FL	☐ DELETE	2.4 CITY-S 3.1 TITLE	T-ZIP		☐ Change	☐ Addition
TITLE		☐ DEFE IE	3.1 IIILE			. C Singlings	
NAME			3.3 STREET	ADODESS	•		
STREET ADDRESS			3.4. CITY-S				
CITY-ST-ZIP		□ DELETE	4.1 TITLE	1-219		[] Change	☐ Addition
			4, 2 NAME		•		_
NAME	,		4,3 STREET	ADORESS	•		
STREET ADDRESS	{		4.4 CITY-ST	f·	,		
CITY-ST-ZIP TITLE		☐ DELETE	5.1 TITLE	,-2r		☐ Change	☐ Addition
NAME		-	5.2 NAME				
STREET ADDRESS			5.3 STREET	ADDRESS			
CITY-ST-ZIP;			5.4 CITY-ST	T-ZIP			
TITLE .		☐ DELETE	6.1 TITLE			☐ Change	Addition
NAME			6.2 NAME				
OTDEET ADDDESS			6.3 STREET	ADDRESS		•	

14. 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 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, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTO

P 3/25/99 305-891-7625

CR2F034 (11)