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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # J13364

(1)

FILED

Apr 17 1997 8:00am

Secretary of State

NAROTA	AM, INC.							
Principal Plac	e of Business	Mailing Address				181 81811 BLULL B		3 (9)) (13)
% DILIP PATEL ECOMOMY INN. US HWY #301 NORTH LAWTEY FL 32058		% DILIP PATEL ECOMOMY INN. US HWY LAWTEY FL 32058	#301 NORT	Н				
					3. Date Incorporated or Qualified 05/07/1986	7	ate of Last R 04/1996	leport
2. Principal P	lace of Business	2a. Mailing Address			4. FEI Number			oplied For
E CO	NOMY INN	26 ECONOMY	IIV	N	59-268 1883	•		ot Applicable
Suite, Apt		Suite, Apt. #, etc.		y 301N	. 5 Certificate of Statue Desired			Additional equired
City & Stat		City & State	73 nw.	3 30117	B. Election Campaign Financing			May Be
23 LAW	TEY FL.	28 LAWTEY	FL		Trust Fund Contribution			to Fees
Zip	Country	Zip	Count	•	8. This corporation has liability for	or intangible	tax under s	199.032,
24 3205			30 BR	<u>adfor(</u>	Plorida Statutes		No No	
	9. Name and Address of Currer	nt Registered Agent		41 Nama	10. Name and Address of New I	Registered	Agent	
	EL, DILIP		8	1 Name				
	NOMY INN		8:	2 Street Add	fress (P.O. Box Number is Not Accept	cceptable)		
	HWY #301 NORTH		8:	3				
LAY	/TEY FL 32058		10.	1				
			8	4 City		FL	85 Zip	Code
				. 1			i i i i	ts registered
11. Pursuant	to the provisions of Sections 607.050	2 and 607.1508, Florida State	utes, the abo	ve-named cor	rporation submits this statement for the	purpose o	i changing i	is registered
	to the provisions of Sections 607.050 registered agent, or both, in the State in familiar with, and accept the oblig	02 and 607.1508, Florida Statu of Florida, Such change was ations of, Section 607.0505, F	utes, the abo authorized to forida Statute	ve-named cor by the corpora es.	poration submits this statement for the ation's board of directors. I hereby acc	e purpose of cept the app	i changing i ointment as	registered
SIGNATURI	Signature typisd or punted name of registered again	ent and title if applicable (NC	OTE: Registered A		uired when reinstaling)	DATE		
SIGNATURII	Signature, typed or punied name of registered age OFFICERS AN	ent and tice if applicable (NC D DIRECTORS	OTE: Registered A	gent signature requ		DATE	DIRECTOR	RS IN 12
SIGNATURE 12. THE	Signature: typed or punied name of registered age OFFICERS AN	ent and title if applicable (NC	TE: Registered A	gent signature requ	uired when reinstaling)	DATE		RS IN 12
SIGNATURE 12. THE NAME	Signature typed or punish name of registered age OFFICERS AN P PATEL, NAROTAM	ent and tice if applicable (NC D DIRECTORS	TE: Registered A 13. 11 TITLE	gent signature requ	uired when reinstaling)	DATE	DIRECTOR	RS IN 12
SIGNATURE 12. THE NAME SIRELI ADDRESS	Signature typed or punish name of registered age OFFICERS AN P PATEL, NAROTAM US HIGHWAY 301 NORTH	ent and tice if applicable (NC D DIRECTORS	13. 11 TITLE 1.2 NAME	gent signature requi	uired when reinstaling)	DATE	DIRECTOR	RS IN 12
SIGNATURE 12. THE NAME SIRELI ADDRESS CITY-ST-ZIP	Signifure hyperd or printed name of registered age OFFICERS AN P PATEL, NAROTAM US HIGHWAY 301 NORTH LAWTEY FL	ent and bite if applicable (NC D DIRECTORS DELETE	13. 11 TITLE 1.2 NAMI 1.3 STREE	gent signature requires	uired when reinstaling)	DATE	DIRECTOR Change	RS IN 12
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I for mereby certify that the information supplies with this mining does not qualify to the exemption stated in 36thors. Find 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.