

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.
AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

FILED
Jul 16 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **J20598**

(5)

1. Corporation Name

ISLAMORADA INN, INC.



Principal Place of Business

Mailing Address

**107900 OVERSEAS HWY
KEY LARGO FL 33037
US**

**P. O. BOX 1453
KEY LARGO FL 33037
US**

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

21 **478 SUMMERLAND RD**

Suite, Apt. #, etc.

22 **-**

City & State

23 **KEY LARGO - FLORIDA**

Zip

24 **33037**

Country

25 **U.S.A.**

2a. Mailing Address

26 **P.O. BOX 1453**

Suite, Apt. #, etc.

27 **-**

City & State

28 **KEY LARGO, FLORIDA**

Zip

29 **33037**

Country

30 **U.S.A.**

3. Date Incorporated or Qualified

06/23/1986

4. FEI Number

59-2693040

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. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

**PATEL, YOGENDRA C.
107900 OVERSEAS HIGHWAY
KEY LARGO FL 33037**

10. Name and Address of New Registered Agent

81 Name

YOGENDRA C. PATEL

82 Street Address (P.O. Box Number Is Not Acceptable)

213 ATLANTIC BLVD

83

APT. 2 B

84 City

KEY LARGO

FL

85 Zip Code

33037

11. Pursuant to the provisions of sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, section 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

7/11/98
DATE

12. OFFICERS AND DIRECTORS

TITLE **PD** ☐ DELETE

NAME **PATEL, YOGENDRA C.**
STREET ADDRESS **107900 OVERSEAS HWY.**
CITY-ST-ZIP **KEY LARGO FL**

TITLE **D** ☐ DELETE

NAME **PATEL, SHAILESH C.**
STREET ADDRESS **107900 OVERSEAS HWY.**
CITY-ST-ZIP **KEY LARGO FL**

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE **PD** ☒ Change ☐ Addition

1.2 NAME **YOGENDRA C. PATEL**
1.3 STREET ADDRESS **213 ATLANTIC BLVD**
1.4 CITY-ST-ZIP **KEY LARGO - FL 33037**

2.1 TITLE **D** ☒ Change ☐ Addition

2.2 NAME **SHAILESH C. PATEL**
2.3 STREET ADDRESS **213 ATLANTIC BLVD**
2.4 CITY-ST-ZIP **KEY LARGO - FL 33037**

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

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.

SIGNATURE:

YOGENDRA C. PATEL - 7/11/98

CR2E034 (5/98)