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PROFIT CORPORATION ANNUAL REPORT



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

1996

SIGNATURE:

SIGNATURE AND TYPES OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

MONF	RO MOTELS, INC.								
incipal Place	of Business	Mailin	g Address		,		II 11401 301F 03	IBRI DIVIL DIBII DID	
3240 NE 13TH ST POMPANO BEACH FL 33062 3240 NE 13TH ST POMPANO BEACH FL			33062						
						3. Date Incorporated or Qualifie 01/30/1987	ad 3a.	Date of Last R 03/17/19	•
Principal Pla	ace of Business		ailing Address		•	4, FEI Number		\vdash	Applied For
Suite, Apt. #	# ata	26	uite, Apt. #, etc.			59-2766951			Not Applicable Additional
Suite, Apt. +	#, BIC.	27	ille, Apt. #, etc.		•	5. Certificate of Status Desired			Required
City & State			ty & State			6. Election Campaign Financing	·	\$5.0	O May Be
		28	· · · · · · · · · · · · · · · · · · ·			Trust Fund Contribution			d to Fees
Zip	Country	29 Zı	ρ	Cour	itry	8. This corporation has liability Florida Statutes	for intangit Yes		199.032,
	25 Name and Address of Curren		ed Agent	30]		10. Name and Address of Nev			
		<u> </u>			81 Name				
SMITH, JULIE ANGELA 3240 NE 13TH STREET				-	82 Street Add	Address (P.O. Box Number is Not Acceptable)			
				L					
POMPA	ANO BEACH FL 33062				83				
				•	84 City			85 Zi	p Code
or register	o the provisions of Sections 607.0502 ed agent, or both, in the State of Florid th, and accept the obligations of, Sect	da. Such ch	anoe was authoriz	zed by the c	re-named corpor porporation's boa	oration submits this statement for the ard of directors. I hereby accept the a	purpose o appointmer	f changing its r it as registered	registered offi I agent. I am
			o, nonda Statules	S.					
	Signature, typed or printed name of registered agent		·		Agent signature requir	red when reinstating):	DA	re	
	OFFICERS AN	t and title if appli	cable (NC	DTE: Registered i		red when reinstating: ADDITIONS/CHANGES TO C	 	AND DIRECTO	
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