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

**PROFIT CORPORATION** ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997 DOCUMENT # K71556

(0)

DIXIANA MOTEL, INC.

Mailing Address

Principal Place of Business

CAS CONCT & MANT

FILED
May 06 1997 8:00am
Secretary of State



	2/1996 Applied For Not Applied St. 75 Addition Fee Required \$5.00 May Be	
21 26 65-0113967 Sulte, Apt. #, etc. 5 Cartificate of Status Degree	Not Applic \$8.75 Addition Fee Required	
Sulte, Apt. #, etc.  Suite, Apt. #, etc.  5. Cartificate of Status Decard	\$8.75 Addition Fee Required	cable
Sulte, Apt. #, etc. Suite, Apl. #, etc.	\$8.75 Addition Fee Required	
27 P. Certificate of status Desired		
<del> </del>	\$5.00 May Be	
City & State City & State 6. Election Campaign Financing	6. Election Cempaign Financing\$5.00 May Be	
28 Trust Fund Contribution	Trust Fund Contribution	
	8. This corporation has liability for intangible tax under s. 199.032,	
EV	No	
9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent		
WINTTER, ERNST G. 81 Name		
2239 HOLLYWOOD BLVD.  82 Street Address (P.O. Box Number is Not Acceptable)	Address (P.O. Box Number is Not Acceptable)	
HOLLYWOOD FL 33020		
84 City	85 Zip Code	
	l I	leted
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 coffice 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 appoint agent, I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes	intmont as registor	red
		1
SIGNATURE Signature, typical or printed name of registered agent and title if applicable (NOTE: Registered Agent signature regulated when reinstating) DATE		
12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND D	DIRECTORS IN 12	5 6
	ChangeAd	Idition 2
NAME WINTTER, ERNST G. 12 NAME		
STREET ADDRESS 2239 HOLLYWOOD BLVD. 1.3 STREET ADDRESS		
CITY-ST-ZIP HOLLYWOOD FL 14 CITY-ST-ZIP		5
	ChangeAd	ddition
NAME 22 NAME		
STREET ADDRESS 2 3 STREET ADDRESS		
CITY-ST-ZIP 2.4 CITY-S1-ZIP		1
<del></del>	Change Ad	dilion
NAME 32 NAME		
STREET ADDRESS 3.3 STREET ADDRESS		
CITY+ST-ZIP 3.4. CITY+ST-ZIP		Ì
	Change Ad	dition
NAME 4.2 NAME		
STREET ADDRESS 4.3 STREET ADDRESS		- 1
CITY-S1-ZIP 4.4 CITY-S1-ZIP		
<u> </u>	ChangeAd	ddition
NAME 52 NAME		-
STREET ADDRESS 53 STREET ADDRESS		
CITY-ST-ZIP 5.4 CITY-ST-ZIP		
	Change Ac	ddition
NAME 62 NAME		
STREET ADDRESS 63 STREET ADDRESS		
DITY-ST-ZIP 6.4 CHY-S1-ZIP		]

14. I do 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 logal effect as if made under oath, that I am an officer or director of the corporation or the rejeiver 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 charged, of on air all achment with an address.

April 28, 1997