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

PROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Socretary of State
DIVISION OF CORPORATIONS

K82576

(5)

DOCUMENT # MATTER HOTEL, INC.

(-

## FILED Feb 27 1998 8:00am Secretary of State

•	WEBSTER HOTE	EL, INC.											
Principal Place of Business				Mailing Address				_	ISBN DIBN BJÐJU 1681				
WNEISEN O. KASDIN 230 FIFTH STREET MIAMI BEACH FL 33139-602				%NEISEN O. KASDIN 230 FIFTH STREET MIAMI BEACH FL 33139-6802				DO NOT WRITE IN THIS SPACE					
								3. Date Incorporated or Qualified 04/21/1989					
				Mailing Address				4. FEI Number	Applied For				
21			26	26				65-0115692	Not Applicable				
Suite, Apt. #, etc			27	Suite, Apt. #, etc.				5. Certificate of Status Desired					
23	City & State		28	City & State									
24	Zip	Country 25	29	Zφ	30 Co	untry	,						
		and Address of Curre	nt Regi	stered Agent		Ţ		6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees  8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No  10. Name and Address of New Registered Agent					
ROBINS, CRAIG							Name						
MIAMI BEACH FL 33139						82							
						83							
						84	City	E1 85	Zip Code				

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, typed or printed name of registered agent and bite it app		E Registered Agent signature requi		
12.	OFFICERS AND DIRECTOR		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	
TITLE	PST	DELETE	1.1 TITLE	Change	Additio
NAME	ROBINS, CRAIG		1.2 NAME		
STREET ADDRESS	230 FIFTH STREET		1.3 STREET ADDRESS		
CITY - ST - ZIP	MIAMI BEACH FL		1.4 CITY-ST-ZIP		
TITLE	D	DELETE	21 TITLE	☐ Change	Additio
NAME	ROBINS, CRAIG		2 2 NAME		
Street address	230 FIFTH STREET		2 3 STREET ADDRESS		
CITY - ST - ZiP	MIAMI BEACH FL		2. 4 CiTY-ST-ZiP		
ITLE	VP	☐ DELETE	3.1 TITLE	☐ Change	Additio
iame	Gretenstein, Steven		3.2 NAME		
STREET ADDRESS	230 5 ST		3.3 STREET ADDRESS		
CITY-ST-ZIP	MIAMI BCH FL		3.4. CITY-ST-ZIP		
ALE .		DELETE	4.1 TITLE	☐ Change	Additio
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
MTLE		DELETE	51 TITLE	☐ Change	Additio
NAME			5.2 NAME		
TREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
ITLE		DELETE	6.1 TITLE	☐ Change	Additio
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
*ITV. ST. 7ID			6 A CITY - ST - 7ID		

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 supplied only ground 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 laboration of the laboration of

SIGNATURE: Craia 206 AS Pres 0/20/98 531-8700

E034 (10/97)