

**2003 LIMITED LIABILITY COMPANY  
UNIFORM BUSINESS REPORT (UBR)**


**FILED**  
**Jan 16, 2003 8:00 am**  
**Secretary of State**

01-16-2003 90228 027 \*\*\*\*50.00

20009200



☐ CHECK HERE IF MAKING CHANGES

|   |   |  |   |
|---|---|--|---|
| <b>DOCUMENT # L01000011339</b>  |   |   |   |
| 1. Entity Name<br><b>MONARCH HOSPITALITY, LLC</b>   |   |  |   |
| Principal Place of Business<br><b>2992 W INTERNATIONAL SPEDWAY BLVD<br/>DAYTONA BEACH FL 32124</b>  |   | Mailing Address<br><b>2992 W INTERNATIONAL SPEDWAY BLVD<br/>DAYTONA BEACH FL 32124</b>   |   |
| 2. Principal Place of Business  |   | 3. Mailing Address   |   |
| Suite, Apt. #, etc.   |   | Suite, Apt. #, etc.  |   |
| City & State  |   | City & State   |   |
| Zip   | Country   | Zip  | Country   |
| 4. FEI Number <b>59-3724795</b>   |   | Applied For<br><input type="checkbox"/> Not Applicable   |   |
| 5. Certificate of Status Desired <input type="checkbox"/> <b>\$5.00 Additional Fee Required</b>   |   |  |   |
| 6. Name and Address of Current Registered Agent<br><b>PATEL, MANILAL R<br/>2992 W INTERNATIONAL SPEDWAY BLVD<br/>DAYTONA BEACH FL 32124</b>   |   | 7. Name and Address of New Registered Agent<br>Name<br>Street Address (P.O. Box Number is Not Acceptable)<br>City <b>FL</b> Zip Code |   |
| 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.   |   |  |   |
| SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____   |   |  |   |
|   |   | <b>FILE NOW!!! FEE IS \$50.00<br/>Make Check Payable to Florida Department of State<br/>Due By May 1, 2003</b>                       |   |
| 9. MANAGING MEMBERS/MANAGERS  |   | 10. ADDITIONS/CHANGES  |   |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP  | <b>MGRM<br/>PATEL, MANILAL R<br/>2992 W INTERNATIONAL SPEDWAY BLVD<br/>DAYTONA BEACH FL 32124</b> <input type="checkbox"/> Delete | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP   | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP  | <b>MGRM<br/>PATEL, DAXABEN M<br/>2992 W INTERNATIONAL SPEDWAY BLVD<br/>DAYTONA BEACH FL 32124</b> <input type="checkbox"/> Delete | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP   | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
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| 11. 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 report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes. |   |  |   |
| SIGNATURE: <b>MANILAL R PATEL</b>   |   | Date <b>1-15-2003</b> Daytime Phone # <b>386-253-0643</b>  |   |
| SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE   |   |  |   |

CR2E083 (10/02)