

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000035751

FILED
Jul 03, 2004
Secretary of State

Entity Name: THE HOSPITALITY MANAGEMENT GROUP LLC

Current Principal Place of Business:

437 SAN FERNANDO DRIVE
PALM SPRINGS, FL 33461

New Principal Place of Business:

Current Mailing Address:

437 SAN FERNANDO DRIVE
PALM SPRINGS, FL 33461

New Mailing Address:

FEI Number: 20-0246410

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FORM-A-CORP LLC
100 VILLAGE SQUARE CROSSING
SUITE 103
PALM BEACH GARDENS, FL 334104531 US

Name and Address of New Registered Agent:

NICOLETTI, PAUL J
625 N. FLAGLER DRIVE
9TH FLOOR
WEST PALM BEACH, FL 33401 US

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.

SIGNATURE: PAUL J. NICOLETTI

07/03/2004

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: MGRM () Delete
Name: ELKINS, JEFFREY A
Address: 437 SAN FERNANDO DRIVE
City-St-Zip: PALM SPRINGS, FL 33461

Title: MGRM () Delete
Name: MOON TONG SHING,
Address: 9920 N. OAK KNOLL CIRCLE
City-St-Zip: FORT LAUDERDALE, FL 33324

Title: MGRM () Delete
Name: NICOLETTI, PAUL J
Address: 946 S. PATRICK CIRCLE
City-St-Zip: WEST PALM BEACH, FL 33406

Title: MGRM () Delete
Name: TAM WAH SHING,
Address: 115 NW 72ND AVENUE
City-St-Zip: PLANTATION, FL 33317

Title: MGRM () Delete
Name: ELKINS, BARBARA M
Address: 4400 HILLCREST DRIVE, APT. #415
City-St-Zip: HOLLYWOOD, FL 33021

Title: MGRM () Delete
Name: YOUNG, DARYL
Address: 330 SADDLECREEK CIRCLE
City-St-Zip: ROSWELL, GA 30076

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
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Address:
City-St-Zip:

Title: () Change () Addition
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Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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: JEFFREY A. ELKINS

MM

07/03/2004

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date