2007 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:

Secretary of State DOCUMENT # L27118 03-22-2007 90004 002 ***150.00 LODGING & HOSPITALITY REALTY, INC. Principal Place of Business Mailing Address 3109 PONCE DE LEON BLVD 3109 PONCE DE LEON BLVD CORAL GABLES, FL 33134 CORAL GABLES, FL 33134 01032007 No Chg-P CR2E034 (11/05) Applied For 4. FEI Number 65-0157877 Not Applicable \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent TRUSTY, GUY DO NOT WRITE 3109 PONCE DE LEON BLVD CORAL GABLES, FL 33134 IN THIS SPACE 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. (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. TITLE PVTD TRUSTY, GUY NAME STREET ADDRESS 3109 PONCE DE LEON BLVD CORAL GABLES, FL 33134 CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-7IP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS 12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an appliess, with all other like empowered.

FILED

Mar 22, 2007 8:00 am