

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **M05224** (4)

1. Corporation Name

HOTEL GROUP, INC.



Principal Place of Business

**825 S. BAYSHORE DRIVE
TOWER III - SUITE 1643
MIAMI FL 33131**

Mailing Address

**825 S. BAYSHORE DRIVE
TOWER III - SUITE 1643
MIAMI FL 33131**

3. Date Incorporated or Qualified

09/14/1984

3a. Date of Last Report

05/01/1995

2. Principal Place of Business

21

2a. Mailing Address

26

4. FEI Number

59-2517913

Applied For

Not Applicable

Suite, Apt. #, etc.

22

Suite, Apt. #, etc.

27

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

City & State

23

City & State

28

6. Election Campaign Financing
Trust Fund Contribution

☐

**\$5.00 May Be
Added to Fees**

Zip

24

Country

25

Zip

29

Country

30

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

**MENDELSON, LAURANS A.
825 S BAYSHORE DR STE 1643
MIAMI FL 33131**

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0602 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

Signature typed or printed in Block, and the name and address of the registered agent.

Printed Name and Address of the Registered Agent.

DATE

12. OFFICERS AND DIRECTORS

☐ DELETE

**S
MENDELSON, ARLENE
825 S BAYSHORE DR #1643
MIAMI FL**

☐ DELETE

**PD
MENDELSON, LAURANS A.
825 S BAYSHORE DR #1643
MIAMI FL**

☐ DELETE

**AS
VETTER, JUDITH
825 S BAYSHORE DR #1643
MIAMI FL**

☐ DELETE

**V
PAUL, JOSEPH A.
825 S BAYSHORE DR. #1643
MIAMI FL**

☐ DELETE

**NAME
STREET ADDRESS
CITY - ST - ZIP**

☐ DELETE

**NAME
STREET ADDRESS
CITY - ST - ZIP**

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY - ST - ZIP

☐ Change ☐ Addition

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY - ST - ZIP

☐ Change ☐ Addition

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY - ST - ZIP

☐ Change ☐ Addition

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY - ST - ZIP

☐ Change ☐ Addition

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY - ST - ZIP

☐ Change ☐ Addition

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY - ST - ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished. I do not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplementary annual 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 12 or Block 13 if changed, or on an addition with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-29-96 (305) 374-1744

CR2E034 (12/95)