FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT

1995

FLORIDA DEPARTMENT OF STATE

APPROVED AND FILED

95 MAY 10 AM 10:35

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # M28303 (9)

1. ADAMS HOTEL CORPORATION

C/O DAVID PEARLSON
2000 PARK AVENUE
MIAMI BEACH FL 33139

C/O DAVID PEARLSON
2000 PARK AVENUE
MIAMI BEACH FL 33139

3. Date Incorporated/Qualified: 03/04/1986

3a. Date of Last Report: 04/11/1994

4. FEI Number: 59-2676849

Applied For / Not Applicable

5. Certificate of Status Desired: $8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution: $5.00 May Be Added to Fees

8. Does corporation owe any back taxes under Florida Statutes? Yes / No

9. Name and Address of Current Registered Agent

BERGER, DAVID
BROAD, V. CASSELL
175 N.W. FIRST AVE, #2000
MIAMI FL 33128

10. Name and Address of New Registered Agent

81 Name: DAVID PEARLSON
82 Street Address (P.O. Box Number is Not Acceptable): 2030 PARK AVE
83
84 City: MIAMI BEACH FL 85 Zip Code: 33139

11. Pursuant to the provisions of Section 607.0501, 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 that position as provided for in Florida Statutes.

SIGNATURE: David Pearlson, 5/4/95

12. OFFICER AND DIRECTOR

TITLE	PD
NAME	PEARLSON, SYLVIA
STREET ADDRESS	2000 PARK AVE
CITY-ST-ZIP	MIAMI BEACH FL
TITLE	VPD
NAME	PEARLSON, DAVID T.
STREET ADDRESS	2000 PARK AVE
CITY-ST-ZIP	MIAMI BEACH FL

13. ADDITIONS, CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP — ☐ Change ☐ Addition

14. I, the undersigned, certify that the information supplied with this filing is absolutely furnished and 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 or supplemental 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 with an address, with an X in the box.

SIGNATURE: David T. Pearlson 5/4/95 305-531-2111

SIGNATURE AND TYPED OR PRINTED NAME OF BUSINESS OFFICER OR DIRECTOR

David T. Pearlson

0146913 CP