### 2004 FOR PROFIT CORPORATION ANNUAL REPORT

#### Apr 23, 2004 8:00 am Secretary of State **DOCUMENT # P00000053674** 1. Entity Name U.S. HOSPITALITY OF TAMPA BAY, INC. 04-23-2004 90206 021 \*\*\*150.00 Principal Place of Business Mailing Address : + 3605 W HILLSBOROUGH AVE 4204 N. NEBRASKA AVE. TAMPA, FL 33614 TAMPA, FL 33603 2. Principal Place of Business 3. Mailing Address-Suite, Apt. #, etc. Suite, Apt. #, etc. 01052004 Chg-P CR2E034 (10/03) City & State City & State 4. FEI Number Applied For 59-3662595 Not Applicable Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name MALONE, MICHAEL A PANIEL F. JOHNSON CPA PANIEL F. JOHNSON CPA PANIEL F. JOHNSON CPA Street Address (P 31940 US 19 NORTH PALM HARBOR, FL 34684 31940 U.S. 19 N. PALM HARBOR, FL 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, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. After May 1, 2004 Fee will be \$550.00 Added to Fees 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 PSTD PSTD TITLE Delete TITLE ☐ Change ☐ Addition Tricia Cadicamo APT dE MALONE, MICHAEL A NAME NAME 31940 US 19 NORTH STREET ADDRESS STREET ADDRESS CITY-ST-7IP PALM HARBOR, FL 34684 CITY-ST-ZIP Howard Beach NY /1414 TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP ☐ Delete TITLE TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. 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 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 address, with all other like empowered.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED

FEI Number

Address

City, State

FEI Number Status

Suite, Apt. #, etc.

Zip Code & Country 33614

Certificate of Status Desired G Yes O No

TAMPA



### **Division of Corporations**

54039030

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## Document Number P0000053674 Business Entity Name

C Applied For C Not Applicable © Current

\$8.75 each

U.S. HOSPITALITY OF TAMPA BAY, INC.

Principal Place of Business
3605 W HILLSBOROUGH AVE

593662595

	· •	Mailing Address	
•	Address	4204 N. NEBRASKA AVE.	
	Suite, Apt. #, etc.		Ÿ
	City, State	TAMPA , FL	
**************************************	Zip Code & Country	33603	
	/ Name A	nd Address of Registered Agent	
	Name (Last, First, Middle, Title	MALONE MICHAEL A	
my w.	-or- RA Business Name		<u></u>
i di nut	Address	31940 US 19 NOB7H	
They I Wal	Suite, Apt. #, etc.		<u></u>
, Maria	City, State	PALM HARBOR , FL	
Should now	Zip Code & Country	34684 US	
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I	Registered Agent Signature		

attachment

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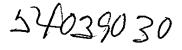
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# Document Number (P0000053674 Business Entity Name U.S. HOSPITALITY OF TAMPA BAY, INC.

Election Campaign Financing Trust Fund Contribution C Yes © No

### Officer/Director Name And Address

Title	PSTD
Name (Last, First, Middle, Title)	MALONE MICHAEL A
-or- Entity Name	
Street Address	31940 US 19 NORTH
City, State	PALM HARBOR , FL
Zip Code & Country	34684
Title	
Name (Last, First, Middle, Title)	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
-or- Entity Name	
Street Address	
City, State	,
Zip Code & Country	
Title -	
Name (Last, First, Middle, Title)	, , , , , , , , , , , , , , , , , , , ,
-or- Entity Name	
Street Address	
City, State	
Zip Code & Country	
Title	
Name (Last, First, Middle, Title)	, , , , , , , , , , , , , , , , , , , ,
-or- Entity Name	

Division of Corporations	attachment	Page 2 of 2
Street Address City, State Zip Code & Country		_ 54039030
Title Name (Last, First, Middle, T -or- Entity Name Street Address City, State Zip Code & Country	itle)	
Title  Name (Last, First, Middle, T  -or- Entity Name  Street Address  City, State  Zip Code & Country	itle)	
An individual name	<del>``</del>	rectors to list
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