

2002 UNIFORM BUSINESS REPORT (UBR)

0222511 AV

DOCUMENT # P00000068073

1. Entity Name:
THE CHARMING HOTELS MANAGEMENT, INC.

FILED

02 NOV 14 PM 12:23

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business:
510 OCEAN DRIVE
MIAMI BEACH FL 33139

Listing Address:
510 OCEAN DRIVE
MIAMI BEACH FL 33139



AMENDED

2. Principal Place of Business:
State: Zip:
City & State:
Zip: Country:

3. Mailing Address:
State: Zip:
City & State:
Zip: Country:

4. Filing Number: 65-1024834

5. Certificate of Name Change: ☐ **\$0.75 Additional Fee Required**

6. Name and Address of Current Registered Agent:
LEVINE, ALAN W
1110 BRICKELL AVENUE 7TH FLOOR
MIAMI FL 33131

7. Name and Address of New Registered Agent:
Name:
Street Address (P.O. Box Number, if applicable):
City: FL Zip Code:

6. Name and Address of Current Registered Agent:
LEVINE, ALAN W
1110 BRICKELL AVENUE 7TH FLOOR
MIAMI FL 33131

7. Name and Address of New Registered Agent:
Name:
Street Address (P.O. Box Number, if applicable):
City: 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.

SIGNATURE: **FILE NOW!!! FEE IS \$150.00 After May 1, 2002 Fee will be \$550.00 Make Check Payable to Department of State**

9. This corporation is eligible to satisfy its tangible tax filing requirement and elects to do so: ☐

10. Election Campaign Financing: ☐ **\$5.00 May Be Added to Fees**

11. OFFICERS AND DIRECTORS

NAME	DATE	STREET ADDRESS	CITY-STATE-ZIP	☐ Delete
PTS RICCITELLI, MAURIZIO		510 OCEAN DRIVE	MIAMI BEACH FL 33139	☐
VP MELOTTI, ENZO		510 OCEAN DRIVE	MIAMI BEACH FL 33139	☒
VP PEDRO ZAPATA		510 OCEAN DRIVE	MIAMI BEACH, FL 33139	☒
				☐
				☐

12. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS (SEE 11)

NAME	DATE	STREET ADDRESS	CITY-STATE-ZIP	☐ Change	☐ Addition
VP PEDRO ZAPATA		510 OCEAN DRIVE	MIAMI BEACH, FL 33139	☐	☒
				☐	☐
				☐	☐

3. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 113.07(3)(b), Florida Statutes, and 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 person or persons empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears on Block 11 or Block 12 of this report, or on an attachment with my address, with all other like empowered.

SIGNATURE: *[Signature]* **10/30/02 305-538-1700**