FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P02033

Compris Hotel Corporation

FILED Jun 18 1997 8:00am Secretary of State

Principal Place of Business Mailing Address													
410 N. 44th St., #700 410 N. 44th St						#7	กก						
				Phoenix, AZ 85008									
}			•	nooning ne	0000	,,,		3 Date incorporate	d or Qualified	3a Data	t Lact E	Papart	
									3. Date incorporated or Qualified January 3, 1984				
2. Principal F	Place of Busi	ness	2a.	Mailing Address				4. FEI Number	1304	.l	ΙΔ.	pplied For	
21			26	3 ·				1				ot Applicable	
I Suite, Apt.	#, etc.			Suite, Apt. #. etc.						S		Additional	
22				27				5. Certificate of Sta	tus Desired	□ 4		equired	
City & State				City & State				6. Election Campai	on Financing		\$5.00	May Be	
23			28					Trust Fund Contr	ibution			to Fees	
Zip		Country	<u> </u>	Zip	Co	untry		8. This corporation				199.032	
24		25	29		30			Florida Statutes		Yes 🔲 N			
<u> </u>	9. Name	and Address of Curr	ent Regist	tered Agent	· · · · · · · · · · · · · · · · · · ·	-		10. Name and Addr	ess of New Reg	istered Age	nt		
CT Co.		an Cuadan				81	Name						
UI Corporation System							62 Street Address (P.O. Box Number is Not Acceptable)						
	Pursuant to the provisions of Sections 607.0502 office or registered agent, or both, in the State agent. I am familiar with, and accept the obligation of Sections 607.0502 office or registered agent, or both, in the State agent. I am familiar with, and accept the obligation of Sections 607.0502 office or registered agent, or both, in the State agent. I am familiar with, and accept the obligation of Sections 607.0502 office or registered agent, or both, in the State of agent. I am familiar with, and accept the obligation of Sections 607.0502 office or registered agent, or both, in the State of agent. I am familiar with, and accept the obligation of Sections 607.0502 office or registered agent, or both, in the State of agent. I am familiar with, and accept the obligation of Sections 607.0502 office or registered agent, or both, in the State of agent. I am familiar with and accept the obligation of sections 607.0502 OFFICERS AND RECE ADDRESS 410 N. 44th St., #76 Phoenix, AZ 85008 E. S./D. Beverly S. Brown at 10 N. 44th St., #76 Phoenix, AZ 85008 E. S./D. Beverly S. Brown at 10 N. 44th St., #76 Phoenix, AZ 85008		t										
Planta	ation,	FL 33324				83							
<u>ن</u>						84	Citv			6	5 Zip	Code	
							·			FL	1 '		
11. Pursuant	to the provis	sions of Sections 607.0	502 and 60	07.1508, Florida Stat	utes, the a	bove d by	-named	corporation submits this state	ement for the pu	urpose of cha	anging i	ts registered	
agent. I a	am familiar w	ith, and accept the obl	gations of	Section 607.0505.	Florida Sta	tutes	i i i i i i i i i i i i i i i i i i i	DOI ALIDIT S DODI O DI GII BOLOIS.	Thereby accept	t the appoint	יוסוונ מט	registered	
SIGNATURE													
	Signature, typed		<u> </u>			d Age	nt signaturi			DATE			
12.	r	OFFICERS A	ND DIREC	DELETE				ADDITIONS/CHAN	IGES 10 OFFIC				
TITLE				L. DECEN						ليا	Change	☐ Addition	
NAME	Richar	d M. Kellehe											
	410 N.	44th St., #	700			3. Date incorpor January 3. Date incorpor January 3. FEI Number 86 – 047106 5. Certificate of 3. This corporation Florida Statute 10. Name and Act 10. Name and						1	
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THILE	13/U	C D		L. DELLIE						Ш	Change	☐ Addition	
NAME	Beveri	y S. Brown	700										
	Phoeni	44 LII 31., # V A7 REAND	700		1			·					
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CITY-ST-ZIP	by cartify the	t the internation award	ad with th	ic filing class not our				tated in Senting 119 87/3///	Elorida Statutos	Liudhacaa	tile that		

I do hereby certify that the information supplied with this filling sloes not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information indicated on this annual report or supplied the same legal effect as if made under oath; that I am an officer or director of the corporation or the fucieive for fursite 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 attachment with an address.

SIGNATURE

ATURE AND TYPED OF HINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/38/97

(602) 220-6778

Daytime Phone #

:034 (9/96)