2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P03000030985

Entity Name: ESHA HOSPITALITY, INC.

FILED Oct 17, 2006 Secretary of State

Littity Naii	ie. ESHATIO	SPITALITT, INC.					
Current Pr	incipal Place	of Business:	New Prince	New Principal Place of Business:			
	LOLLDLY CT LA, FL 32526	US		OLLY LANE DLA, FL 32526	US		
Current Ma	ailing Address	::	New Maili	New Mailing Address:			
3816 MEDFORD DRIVE EAST MOBILE, AL 36693 US				130 LOBLOLLY LANE PENSACOLA, FL 32526 US			
FEI Number:	41-2091838	FEI Number Applied For ()	FEI Number Not App	licable ()	Certificate of Status Desir	ed()	
Name and	Address of Cu	urrent Registered Agent:	Name and	Name and Address of New Registered Agent:			
226 PALAF NINTH FLC PENSACOI The above in the State	OOR, SEVILLE LA, FL 32501 named entity si of Florida.	US ubmits this statement for the p	urpose of changing	its registered of	fice or registered agent	, or both,	
SIGNATUR	E: THOMAS				_		
Election Cam		c Signature of Registered Age Trust Fund Contribution ().	ent		Date		
OFFICERS	AND DIRECT	ORS:	ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	P () I DESAI, RAJEND 3816 MEDFORD MOBILE, AL 366	DRIVE E.	Title: Name: Address: City-St-Zip:	()	Change () Addition		
Title: Name: Address: City-St-Zip:	V () I DESAI, ASHVIN 29450 N. MAIN S DAPHNE, AL 36		Title: Name: Address: City-St-Zip:	()	Change () Addition		
Title: Name: Address: City-St-Zip:	S () I PATEL, RAJIV 3816 MEDFORD MOBILE, AL 366		Title: Name: Address: City-St-Zip:	S (X) PATEL, RAJIV 7210 ANNANDAI PENSACOLA, FI			
Title: Name: Address: City-St-Zip:	T () I PATEL, ANIL 4389 S. ALABAM MONROEVILLE,		Title: Name: Address: City-St-Zip:	()	Change () Addition		
Title: Name: Address: City-St-Zip:	SHMR () I PATEL, BHARAT P.O. BOX 1994 LAUREL, MS 39		Title: Name: Address: City-St-Zip:	()	Change () Addition		

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: RAJ PATEL S 10/17/2006