2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000105753

94 VISTA DEL SOL

MILL VALLEY, CA 94941

Address:

City-St-Zip:

Entity Name: ORLANDO HOSPITALITY, INC

FILED Aug 04, 2004 Secretary of State

| | | BO 11001 117 E11 1, 1140. | | |
|---|---|--|---|--|
| Current Principal Place of Business: | | | New Principal Place | of Business: |
| | THERN BRE D, FL 32836 | EZE DR | | |
| Current Mailing Address: | | | New Mailing Address: | |
| | THERN BRE D, FL 32836 | EZE DR | | |
| FEI Number | : 81-0632993 | FEI Number Applied For() | FEI Number Not Applicable () | Certificate of Status Desired () |
| Name and | l Address of | Current Registered Agent: | Name and Address o | f New Registered Agent: |
| | JANAK S THERN BRE), FL 32836 | EZE DR | | |
| | named entity e of Florida. | γ submits this statement for the γ | purpose of changing its registered | d office or registered agent, or both, |
| SIGNATU | RE: | | | |
| Electronic Signature of Registered Agent | | | ent | Date |
| | | 93(2)(b), F.S., the corporation did nongerous Fund Contribution (). | ot receive the prior notice. | |
| OFFICERS AND DIRECTORS: | | | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS | |
| Title: Name: Address: City-St-Zip: | MAROLIA, JA | ERN BREEZE DR | Title: Name: Address: City-St-Zip: | () Change () Addition |
| Title: Name: Address: City-St-Zip: | D (PATEL, RAMA 102 CHAPEL NOVATO, CA | HILL RD | Title: Name: Address: City-St-Zip: | () Change () Addition |
| Title: Name: Address: City-St-Zip: | D (DESAI, THAKI 1107 MOCKIN SAN JOSE, C | IGBIRD CT | Title: Name: Address: City-St-Zip: | () Change () Addition |
| Title: Name: | D (PATEL, MAHE |) Delete ESH R | Title: Name: | () Change () Addition |

I hereby certify that the information supplied with this filing does not qualify for the 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 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.

Address:

City-St-Zip:

SIGNATURE: JANAK S. MAROLIA D 08/04/2004