

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 19, 2006 8:00 am
Secretary of State

04-19-2006 90088 047 ***150.00

DOCUMENT # P04000009661

1. Entity Name
NORCAR HOSPITALITY, INC.



Principal Place of Business
21 ALMERIA AVE.
CORAL GABLES, FL 33134

Mailing Address
21 ALMERIA AVE.
CORAL GABLES, FL 33134

2. Principal Place of Business
12328 SW 117 Court
Suite, Apt. #, etc.

3. Mailing Address
12328 SW 117 Court
Suite, Apt. #, etc.

City & State
Miami, FL

City & State
Miami, FL

Zip
33186

Country
US

Zip
33186

Country
US

03262006 Chg-P CR2E034 (11/05)

4. FEI Number
20-0287930

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

STEARNS WEAVER MILLER WEISSLER ALHADEFF &
SITTERSON, P.A.
150 WEST FLAGLER ST., STE. 2200
MIAMI, FL 33130

7. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable)
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. I am familiar with, and accept the obligations of registered agent

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐ \$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D AKEN, NORMAN V 21 ALMERIA AVE. CORAL GABLES, FL 33134	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BRUGGEMEIER, CARL 21 ALMERIA AVE. CORAL GABLES, FL 33134	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Van Aken, Norman 12328 SW 117 Court Miami, FL 33186	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Bruggemeier, Carl 12328 SW 177 Court Miami, FL 33186	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: _____
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

3/30/06 305-234-8766

ATTACHMENT
STEARNS WEAVER MILLER
WEISSLER ALHADEFF & SITTERSON, P.A.

Miami ■ Ft. Lauderdale ■ Tampa

April 17, 2006

Via Overnight Courier

Secretary of State
Division of Corporations
2670 Executive Center Circle, Suite 100
Tallahassee, Florida 32301

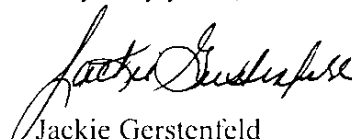
40053580
#P040000966T

Re: Norcar Hospitality, Inc.

Dear Sir/Madame:

Enclosed for filing are an original and one copy of the 2006 Uniform Business Report for the above-referenced Florida corporation, and the Company's check in the amount of \$150 representing the filing fee. Please file stamp the copy and return it to the undersigned in the self-addressed, stamped envelope provided for your convenience.

Very truly yours,



Jackie Gerstenfeld
Corporate Legal Assistant

/jg
Enclosures

cc: Jane Vail
 Rick Schatz

J:\JG\36369.000\2006SOS\NORCAR.LTR.wpd