2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000012634

Address:

City-St-Zip:

138 BONNIE LANE

PANAMA CITY BEACH, FL 32407

Entity Name: EMERALD COAST HOSPITALITY SERVICE, INC

FILED Apr 27, 2005 Secretary of State

Current Principal Place of Business:				New Principal Place	of Business:	
	EACH DRIVE CITY BEACH, F	FL 32408	US			
Current Mailing Address:				New Mailing Addres	New Mailing Address:	
P.O.BOX:	18773 CITY BEACH, F	FL 32408	US			
FEI Number	: 26-0079385	FEI Numb	er Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:				Name and Address of	Name and Address of New Registered Agent:	
#106	S, IMRE NTRAL BLVD D, FL 32801 U	S				
	e named entity s e of Florida.	submits this	s statement for the p	ourpose of changing its registere	d office or registered agent, or both,	
SIGNATU	RE:					
	Electron	ic Signatur	e of Registered Age	ent	Date	
Election Ca	mpaign Financing	g Trust Fund	Contribution ().			
OFFICERS AND DIRECTORS:				ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PRES () BOROS, PETEF 4928/B BEACH PANAMA CITY I	DRIVE	32408 US	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name:	GM () SHAVKUN, AND	Delete REY		Title: Name:	() Change () Addition	

Address:

City-St-Zip:

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.

SIGNATURE: ANDREY SHAVKUN GM 04/27/2005