2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 10, 2009
Secretary of State

DOCUMENT# P04000071773

Entity Name: ARIHUNT HOSPITALITY, INC.

Current Principal Place of Business:

3144 WEST US HWY 90
LAKE CITY, FL 32055

New Principal Place of Business:

Current Mailing Address:

3144 WEST US HWY 90
LAKE CITY, FL 32055

New Mailing Address:

FEI Number: 20-1128922 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

PATEL, PRAVIN J
3144 WEST US HWY 90
LAKE CITY, FL 32055 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: PATEL, PRAVIN J
Address: 3144 WEST US HWY 90
City-St-Zip: LAKE CITY, FL 32055

Title: V ( ) Delete
Name: PATEL, RAMAN N
Address: 190 HOLIDAY ROAD
City-St-Zip: CLARKSVILLE, TN 37040

Title: S ( ) Delete
Name: PATEL, NILESH R
Address: 414 SW FLORIDA GATEWAY DR
City-St-Zip: LAKE CITY, FL 32024

Title: T ( ) Delete
Name: PATEL, SHANKERBHAI G
Address: 109 GEERS DR
City-St-Zip: LEBANON, TN 37087

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: P.J.PATEL P 01/10/2009

Electronic Signature of Signing Officer or Director — Date