

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000002251

FILED
Apr 29, 2009
Secretary of State

Entity Name: MAZILI HOTEL GROUP, INC.

Current Principal Place of Business:

5501 SPRUCE ST W
SUITE B-40
TAMPA, FL 33607

New Principal Place of Business:

5501 W SPRUCE ST
SUITE B40
TAMPA, FL 33607

Current Mailing Address:

5501 SPRUCE ST W
SUITE B-40
TAMPA, FL 33607

New Mailing Address:

5501 W SPRUCE ST
SUITE B40
TAMPA, FL 33607

FEI Number: 20-4083105

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MAZILI, JULIAN A JULIAN
12522 EAGLES ENTRY DR
SUITE B-40
ODESSA, FL 33556 US

Name and Address of New Registered Agent:

MAZILI, JULIAN
12522 EAGLES ENTRY DR
ODESSA, FL 33607 US

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: JULIAN MAZILI

04/29/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: MAZILI, JULIAN P
Address: 12522 EAGLES ENTRY DR
City-St-Zip: ODESSA, FL 33556

Title: VP () Delete
Name: MAZILI, KIMBERLY VP
Address: 12522 EAGLES ENTRY DR
City-St-Zip: ODESSA, FL 33556

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: MR (X) Change () Addition
Name: MAZILI, JULIAN P
Address: 12522 EAGLES ENTRY DR
City-St-Zip: ODESSA, FL 33556

Title: MRS (X) Change () Addition
Name: MAZILI, KIMBERLY J VP
Address: 12522 EAGLES ENTRY DR
City-St-Zip: ODESSA, FL 33556

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: JULIAN MAZILI

PD

04/29/2009

Electronic Signature of Signing Officer or Director

Date