


2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Sep 03, 2008 8:00 am
Secretary of State

09-03-2008 90005 044 ***150.00

DOCUMENT # P06000110905	
1. Entity Name MOTEL & MORE, INC.	

Principal Place of Business 1600 N FEDERAL HWY DELRAY BEACH, FL 33483	Mailing Address 1600 N FEDERAL HWY DELRAY BEACH, FL 33483
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40115057



2. Principal Place of Business - No P.O. Box #		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

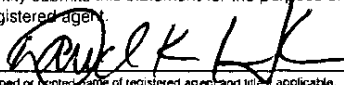
08182008 Chg-P CR2E034 (12/06)

4. FEI Number 56-2606013 56-2606613	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent PETER J. SNYDER, P.A. 101 N FEDERAL HWY # 701 BOCA RATON, FL 33432	
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7. Name and Address of New Registered Agent	
Name DAVID HIRSCH, CPA	
Street Address (P.O. Box Number is Not Acceptable) 175 W CAMINO REAL	
City BOCA RATON	FL 33432

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 	DATE 8/27/08

Signature, typed or printed name of registered agent and title, if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00 Due by September 12, 2008	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
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10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HOQUE, ANM E 1020 KOKOMO KEY LN DELRAY BEACH, FL 33483	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	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: 	08.27.08 561-278-3344
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR	Date Daytime Phone #

ATTACHMENT

40115057

MOTEL & MORE, INC.
1600 N. FEDERAL HIGHWAY
DELRAY BEACH, FL 33483-5926

August 18, 2008

Department of State
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Re: MOTEL & MORE, INC.; Document # P06000110905

To Whom It May Concern:

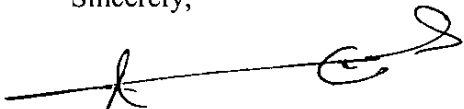
This letter represents a request to reinstate Motel & More, Inc. with the Division of Corporations, State of Florida. We did not receive the 2008 application to file the annual report therefore it was not filed in a timely manner.

We respectfully request a waiver of any late fees.

Please find enclosed a check for \$150.00 (Annual Report Fee) and the application to reinstate the corporation.

Thank you for your consideration and prompt attention to this matter.

Sincerely,

A handwritten signature in black ink, appearing to read 'Ann E. Hoque', with a long horizontal line extending to the left.

Ann E. Hoque, Director