SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997.
AMOUNT DUE ON OR BEFORE 9/17/97: $550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: $750.)

PROFIT CORPORATION
REINSTATEMENT 1997

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
97 NOV -3 PM 4:01

DOCUMENT # P26067 (9)

1. Corporation Name
RAMADA FRANCHISE SYSTEMS, INC.

Principal Place of Business	Mailing Address
ATTEN: LEGAL DEPT 339 JEFFERSON RD PARSIPPANY NJ 07054	ATTEN: LEGAL DEPT 339 JEFFERSON RD PARSIPPANY NJ 07054

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 09/20/1989
3a. Date of Last Report: 05/21/1996

2. Principal Place of Business
21 6 Sylvan Way
Suite, Apt. #, etc. 22
City & State: 23 Parsippany, NJ
Zip: 24 07054 Country: 25 USA

2a. Mailing Address
26 6 Sylvan Way
Suite, Apt. #, etc. 27
City & State: 28 Parsippany, NJ
Zip: 29 07054 Country: 30 USA

4. FEI Number: 22-2993446 ☐ Applied For ☐ Not Applicable

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

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent
C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE Charles W. Meyer **CHARLES W. MEYER SPECIAL ASST. SECRETARY** 10/29/97
Signature, typed or printed name of registered agent and title, if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P	☐ DELETE	1.1 TITLE	900002339059--5 ☐ Change ☐ Addition
NAME	BELMONTE, STEVEN		1.2 NAME	-11/05/97--01080--023
STREET ADDRESS	3 GOLDEN CORNER WAY		1.3 STREET ADDRESS	****200.00 ****200.00
CITY-ST-ZIP	RANDOLPH NJ		1.4 CITY-ST-ZIP	
TITLE	VT	☒ DELETE	2.1 TITLE	Vice Chairman/Chief Financial Officer ☐ Change ☐ Addition
NAME	HOLMES, STEPHEN		2.2 NAME	Michael P. Monaco
STREET ADDRESS	43 GREENVIEW DR		2.3 STREET ADDRESS	350 East 79th Street, Apt. 33A
CITY-ST-ZIP	PEQUANNOCK NJ		2.4 CITY-ST-ZIP	New York, NY 10021
TITLE	S	☐ DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME	MURPHY, JEANNE M		3.2 NAME	
STREET ADDRESS	47 N. VAN DIEN AVENUE		3.3 STREET ADDRESS	900002339059--5
CITY-ST-ZIP	RIDGEWOOD NJ		3.4 CITY-ST-ZIP	-11/05/97--01080--024
TITLE	V	☐ DELETE	4.1 TITLE	Sr. Vice Presid****350.00 ☐ Change ☐ Addition
NAME	FORBES, SCOTT		4.2 NAME	****350.00
STREET ADDRESS	132 WASHINGTON AVE		4.3 STREET ADDRESS	
CITY-ST-ZIP	MORRISTOWN NJ		4.4 CITY-ST-ZIP	
TITLE	V	☐ DELETE	5.1 TITLE	Sr. Executive Vice President ☒ Change ☐ Addition
NAME	BUCKMAN, JAMES		5.2 NAME	James Buckman
STREET ADDRESS	99 WOODFIELD RD		5.3 STREET ADDRESS	
CITY-ST-ZIP	SHORT HILLS NJ		5.4 CITY-ST-ZIP	
TITLE		☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME			6.2 NAME	
STREET ADDRESS			6.3 STREET ADDRESS	
CITY-ST-ZIP			6.4 CITY-ST-ZIP	

CR2E034 (4/97)

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Scott E. Forbes, Sr. Vice President 9/25/97