

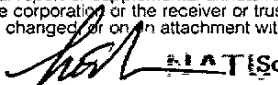
FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

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Jan 30 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998				FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # P26067 (9) 1. Corporation Name RAMADA FRANCHISE SYSTEMS, INC.					
Principal Place of Business 6 SYLVAN WAY PARSIPPANY NJ 07054			Mailing Address 6 SYLVAN WAY PARSIPPANY NJ 07054		
DO NOT WRITE IN THIS SPACE					
2. Principal Place of Business 21 6 Sylvan Way Suite, Apt. #, etc. 22 City & State 23 Parsippany, NJ Zip 24 07054			2a. Mailing Address 26 6 Sylvan Way Suite, Apt. #, etc. 27 City & State 28 Parsippany, NJ Zip 29 07054 Country 30 USA		
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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE					
12. OFFICERS AND DIRECTORS TITLE P [] DELETE NAME BELMONTE, STEVEN STREET ADDRESS 3 GOLDEN CORNER WAY CITY-ST-ZIP RANDOLPH NJ TITLE CFO [] DELETE NAME MONACO, MICHAEL P STREET ADDRESS 350 EAST 79TH STREET APT 33A CITY-ST-ZIP NEW YORK NY 10021 TITLE S [] DELETE NAME MURPHY, JEANNE M STREET ADDRESS 47 N. VAN DIEN AVENUE CITY-ST-ZIP RIDGEWOOD NJ TITLE V [] DELETE NAME FORBES, SCOTT STREET ADDRESS 132 WASHINGTON AVE CITY-ST-ZIP MORRISTOWN NJ TITLE V [] DELETE NAME BUCKMAN, JAMES STREET ADDRESS 99 WOODFIELD RD CITY-ST-ZIP SHORT HILLS NJ TITLE [] DELETE NAME STREET ADDRESS CITY-ST-ZIP					
13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 1.1 TITLE [] Change [] Addition 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE [] Change [] Addition 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE [] Change [] Addition 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE [] Change [] Addition 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE [] Change [] Addition 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 6.1 TITLE [] Change [] Addition 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP					

14. I 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

1/20/98

CR2E034 (10/97)