

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

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

FILED
Apr 22 1997 8:00am
Secretary of State

DOCUMENT # P39638

(2)

1. Corporation Name

ADVANTAGE HOTEL CORPORATION

Principal Place of Business

5001 SPRING VALLEY RD.
STE 710 EAST
DALLAS TX 75244
US

Mailing Address

5001 SPRING VALLEY RD.
STE 710 EAST
DALLAS TX 75244-3974
US

3. Date Incorporated or Qualified

07/13/1992

3a. Date of Last Report

04/30/1996

2. Principal Place of Business

21 2843 W.N.W. LOOP 323

2a. Mailing Address

26 2843 W.N.W. LOOP 323

4. FEI Number

75-2190721

Applied For

Not Applicable

Suite, Apt. #, etc.

22 103

Suite, Apt. #, etc.

27 103

5. Certificate of Status Desired

☒

\$8.75 Additional

Fee Required

City & State

23 TYLER, TEXAS

City & State

28 TYLER, TEXAS

6. Election Campaign Financing
Trust Fund Contribution

☒

\$5.00 May Be
Added to Fees

Zip

24 75702

Country

25 USA

Zip

29 75702

Country

30 USA

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

JEKIC, ALEKSANDAR
17900 SW 264TH STREET
HOMESTEAD FL 33031

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 type for printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

1.1 TITLE ☐ DELETE

CPS
JEKIC, D. MICHAEL
1814 DUNN STREET
GRAPEVINE TX

1.2 NAME ☐ DELETE

1.3 STREET ADDRESS

1.4 CITY - ST - ZIP

1.5 TITLE

1.6 NAME

1.7 STREET ADDRESS

1.8 CITY - ST - ZIP

1.9 TITLE

1.10 NAME

1.11 STREET ADDRESS

1.12 CITY - ST - ZIP

1.13 TITLE

1.14 NAME

1.15 STREET ADDRESS

1.16 CITY - ST - ZIP

1.17 TITLE

1.18 NAME

1.19 STREET ADDRESS

1.20 CITY - ST - ZIP

1.21 TITLE

1.22 NAME

1.23 STREET ADDRESS

1.24 CITY - ST - ZIP

1.25 TITLE

1.26 NAME

1.27 STREET ADDRESS

1.28 CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition

CPS
JEKIC, D. MICHAEL
2843 W.N.W. LOOP 323
TYLER, TEXAS 75702

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

2.5 TITLE

2.6 NAME

2.7 STREET ADDRESS

2.8 CITY - ST - ZIP

2.9 TITLE

2.10 NAME

2.11 STREET ADDRESS

2.12 CITY - ST - ZIP

2.13 TITLE

2.14 NAME

2.15 STREET ADDRESS

2.16 CITY - ST - ZIP

2.17 TITLE

2.18 NAME

2.19 STREET ADDRESS

2.20 CITY - ST - ZIP

2.21 TITLE

2.22 NAME

2.23 STREET ADDRESS

2.24 CITY - ST - ZIP

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 as an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPE OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/15/97

(903) 597-1301

0494965

CR2E034 (9/96)