

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

FILED
May 05 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Morham Secretary of State DIVISION OF CORPORATIONS					
DOCUMENT # A39638 1. Corporation Name ADVANTAGE HOTEL CORPORATION							
Principal Place of Business 2334 OLDFIELD DRIVE ORLANDO, FL 32837		Mailing Address SAME					
2. Principal Place of Business 21 2334 OLDFIELD DRIVE Suite, Apt. #, etc. 22 City & State 23 ORLANDO, FL Zip 24 32837 Country 25 ORANGE		2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country 30					
9. Name and Address of Current Registered Agent JEKIC ALEXANDER 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 85 Zip Code FL					
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: typewritten or printed name of registered agent, if applicable) (NOTE: Registered Agent's signature required when reinstating) DATE _____							
12. OFFICERS AND DIRECTORS 12.1 TITLE CPS 12.2 NAME JEKIC D. MICHEL 12.3 STREET ADDRESS 2843 WINNIE LANE 12.4 CITY-STATE-ZIP TYLER, TX 75702 <input type="checkbox"/> DELETE 12.5 TITLE 12.6 NAME 12.7 STREET ADDRESS 12.8 CITY-STATE-ZIP <input type="checkbox"/> DELETE 12.9 TITLE 12.10 NAME 12.11 STREET ADDRESS 12.12 CITY-STATE-ZIP <input type="checkbox"/> DELETE 12.13 TITLE 12.14 NAME 12.15 STREET ADDRESS 12.16 CITY-STATE-ZIP <input type="checkbox"/> DELETE				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13.1 TITLE CPS 13.2 NAME JEKIC D. MICHEL 13.3 STREET ADDRESS 2334 OLDFIELD DRIVE 13.4 CITY-STATE-ZIP ORLANDO, FL 32837 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 13.5 TITLE 13.6 NAME 13.7 STREET ADDRESS 13.8 CITY-STATE-ZIP <input type="checkbox"/> Change <input type="checkbox"/> Addition 13.9 TITLE 13.10 NAME 13.11 STREET ADDRESS 13.12 CITY-STATE-ZIP <input type="checkbox"/> Change <input type="checkbox"/> Addition 13.13 TITLE 13.14 NAME 13.15 STREET ADDRESS 13.16 CITY-STATE-ZIP <input type="checkbox"/> Change <input type="checkbox"/> Addition 13.17 TITLE 13.18 NAME 13.19 STREET ADDRESS 13.20 CITY-STATE-ZIP <input type="checkbox"/> Change <input type="checkbox"/> Addition 13.21 TITLE 13.22 NAME 13.23 STREET ADDRESS 13.24 CITY-STATE-ZIP <input type="checkbox"/> Change <input type="checkbox"/> Addition 13.25 TITLE 13.26 NAME 13.27 STREET ADDRESS 13.28 CITY-STATE-ZIP <input type="checkbox"/> Change <input type="checkbox"/> Addition 13.29 TITLE 13.30 NAME 13.31 STREET ADDRESS 13.32 CITY-STATE-ZIP <input type="checkbox"/> Change <input type="checkbox"/> Addition 13.33 TITLE 13.34 NAME 13.35 STREET ADDRESS 13.36 CITY-STATE-ZIP <input type="checkbox"/> Change <input type="checkbox"/> Addition 13.37 TITLE 13.38 NAME 13.39 STREET ADDRESS 13.40 CITY-STATE-ZIP <input type="checkbox"/> Change <input type="checkbox"/> Addition 13.41 TITLE 13.42 NAME 13.43 STREET ADDRESS 13.44 CITY-STATE-ZIP <input type="checkbox"/> Change <input type="checkbox"/> Addition 13.45 TITLE 13.46 NAME 13.47 STREET ADDRESS 13.48 CITY-STATE-ZIP <input type="checkbox"/> Change <input type="checkbox"/> Addition 13.49 TITLE 13.50 NAME 13.51 STREET ADDRESS 13.52 CITY-STATE-ZIP <input type="checkbox"/> Change <input type="checkbox"/> Addition 13.53 TITLE 13.54 NAME 13.55 STREET ADDRESS 13.56 CITY-STATE-ZIP <input type="checkbox"/> Change <input type="checkbox"/> Addition 13.57 TITLE 13.58 NAME 13.59 STREET ADDRESS 13.60 CITY-STATE-ZIP <input type="checkbox"/> Change <input type="checkbox"/> Addition 13.61 TITLE 13.62 NAME 13.63 STREET ADDRESS 13.64 CITY-STATE-ZIP <input type="checkbox"/> Change <input type="checkbox"/> Addition 13.65 TITLE 13.66 NAME 13.67 STREET ADDRESS 13.68 CITY-STATE-ZIP <input type="checkbox"/> Change <input type="checkbox"/> Addition 13.69 TITLE 13.70 NAME 13.71 STREET ADDRESS 13.72 CITY-STATE-ZIP <input type="checkbox"/> Change <input type="checkbox"/> Addition 13.73 TITLE 13.74 NAME 13.75 STREET ADDRESS 13.76 CITY-STATE-ZIP <input type="checkbox"/> Change <input type="checkbox"/> Addition 13.77 TITLE 13.78 NAME 13.79 STREET ADDRESS 13.80 CITY-STATE-ZIP <input type="checkbox"/> Change <input type="checkbox"/> Addition 13.81 TITLE 13.82 NAME 13.83 STREET ADDRESS 13.84 CITY-STATE-ZIP <input type="checkbox"/> Change <input type="checkbox"/> Addition 13.85 TITLE 13.86 NAME 13.87 STREET ADDRESS 13.88 CITY-STATE-ZIP <input type="checkbox"/> Change <input type="checkbox"/> Addition 13.89 TITLE 13.90 NAME 13.91 STREET ADDRESS 13.92 CITY-STATE-ZIP <input type="checkbox"/> Change <input type="checkbox"/> Addition 13.93 TITLE 13.94 NAME 13.95 STREET ADDRESS 13.96 CITY-STATE-ZIP <input type="checkbox"/> Change <input type="checkbox"/> Addition 13.97 TITLE 13.98 NAME 13.99 STREET ADDRESS 13.100 CITY-STATE-ZIP <input type="checkbox"/> Change <input type="checkbox"/> Addition			
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 supplement to 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; that I am a resident of the State of Florida; and that my signature is required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, with an attachment with an address. SIGNATURE: [Signature] SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date: 4/30/98 (407) 438-2100 Daytime Phone: 600002511796 -05/05/98--01121--041 ***163.75							

CR2E034 (10/97)