

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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***200.00 ***200.00

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CORPORATION ANNUAL REPORT 1995		FLORIDA DEPARTMENT OF STATE Sandra B. Mathews Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P92000001377 (0)

1. Corporation Name

PREMIER LODGING, INC.

Principal Place of Business

3956 W. COLONIAL DR.
ORLANDO FL 32808
US

Mailing Address

3956 W. COLONIAL DR.
ORLANDO FL 32808
US

3. Date Incorporated or Qualified
11/02/1992

3a. Date of Last Report
05/01/1994

4. FEI Number
59-3146734

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 has liability for intangible tax under S. 199.032,
Florida Statutes ☒ Yes ☐ No

2. Principal Place of Business

21 2905 N 50th Street
Suite Apt #, etc.

2a. Mailing Address

26 2905 N 50th Street
Suite Apt #, etc.

22 City & State

23 Tampa, FL

27 City & State

28 Tampa, FL

24 Zip

24 33619

Country

25 Hillsborough

29 Zip

29 33619

Country

30 Hillsborough

9. Name and Address of Current Registered Agent

VALBH, ANIL
3330 W COLONIAL DR
ORLANDO FL 32808

10. Name and Address of New Registered Agent

81 Name

J.R. Patel

82 Street Address (P.O. Box Number is Not Acceptable)
4515 Village Wood Drive

83

84 City

Orlando

FL

85 Zip Code
32819

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]

(Signature must be printed name of registered agent and title if applicable)

(Signature must be printed name of registered agent and title if applicable)

5/10/95

(Date)

12. OFFICERS AND DIRECTORS

TITLE	D
NAME	VALBH, ANIL
STREET ADDRESS	3956 W. COLONIAL DR.
CITY, ST, ZIP	ORLANDO FL
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	D/P/S	☒ Change ☐ Addition
12 NAME	J.R. Patel	
13 STREET ADDRESS	4515 Village Wood Drive	
14 CITY, ST, ZIP	Orlando, FL 32819	
21 TITLE	V	☐ Change ☒ Addition
22 NAME	Vasant Patel	
23 STREET ADDRESS	2905 N 50th St.	
24 CITY, ST, ZIP	Tampa, FL 33619	
31 TITLE		☐ Change ☐ Addition
32 NAME		
33 STREET ADDRESS		
34 CITY, ST, ZIP		
41 TITLE		☐ Change ☐ Addition
42 NAME		
43 STREET ADDRESS		
44 CITY, ST, ZIP		
51 TITLE		☐ Change ☐ Addition
52 NAME		
53 STREET ADDRESS		
54 CITY, ST, ZIP		
61 TITLE		☐ Change ☐ Addition
62 NAME		
63 STREET ADDRESS		
64 CITY, ST, ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(b), 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. 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:

[Signature]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/24/95

(Date)

813-621-1174

(Telephone Number)