

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P93000029273 (8)
1. Corporation Name

HOTEL ONE, INC.



Principal Place of Business Mailing Address
P.O. BOX 3064 P.O. BOX 3064
FLORIDA CITY FL 33034 FLORIDA CITY FL 33034

2. Principal Place of Business 2a. Mailing Address
21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.
22 City & State 27 City & State
23 Zip Country 28 Zip Country
24 25 29 30

3. Date Incorporated or Qualified 04/20/1993 3a. Date of Last Report 04/21/1995
4. FEI Number 65-0388529 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

9. Name and Address of Current Registered Agent

EPLING, ROBERT
18624 SW 293 TERR
HOMESTEAD FL 33030

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 NAME STREET ADDRESS CITY-ST-ZIP
D STRANO, ROSARIO 26350 SW 182 AVE HOMESTEAD FL 33030
D STRANO, VITO 25450 SW 193 AVE HOMESTEAD FL 33030
D EPLING, ROBERT 18624 SW 293 TERR HOMESTEAD FL 33030
DELETE
DELETE
DELETE
DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE 12 NAME 13 STREET ADDRESS 14 CITY-ST-ZIP
21 TITLE 22 NAME 23 STREET ADDRESS 24 CITY-ST-ZIP
31 TITLE 32 NAME 33 STREET ADDRESS 34 CITY-ST-ZIP
41 TITLE 42 NAME 43 STREET ADDRESS 44 CITY-ST-ZIP
51 TITLE 52 NAME 53 STREET ADDRESS 54 CITY-ST-ZIP
61 TITLE 62 NAME 63 STREET ADDRESS 64 CITY-ST-ZIP

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

R. EPLING

6/1/96

305-245-2211

Daytime Phone #