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**PROFIT** CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## **DOCUMENT #** P93000039685

PRINCE HOSPITALITY MARKETING CORP.

Principal Place	of Business	Mailing	Address					JUA BOAN OBEBO	ifil <b>o fo</b> il <b>o o</b> fio	1 <b>10103 0</b> 111 100)
5770 W. IRLO BRONSON WAY		5770 W. IRLO BRONSON WAY								
STE. 129		STE 129			DO NOT WRITE IN THIS SPACE					
KISSIMMEE FL 34746		KISSIMMEE FL 34746 US			3. Date Incorporated or Qualifed					
00							06/04/1993			
2. Principal Pl	ace of Business	2a. Mai	iling Address				4. FEI Number	_	Ar	oplied For
21		26					59-3190230			ot Applicable
Suite, Apt. #, etc.			Suite, Apt. #, 'etc.			•	5. Certifcate of Status Desired	X		Additional equired
City & State		27 Cits	City & State			6. Election Campaign Financing			May Be	
23		— ·	28			Trust Fund Contribution		,	to Fees	
Zip	Country	Zip		Coun	ntry		8. This corporation owes the curr	ent year Inta	ngible	
24	25	29		30			Personal Property Tax.		Yes	□No
	9. Name and Address of Current	t Registere	d Agent	<del></del> +	81	Mana	10. Name and Address of New	Registered A	lgent	
LI IN	DIEV CHADIES D				81	Name				
HUNDLEY, CHARLES D. 5770 W IRLO BRONSON HWY 129				[	82	Street Addre	ress (P.O. Box Number is Not Acceptable)			
	MMEE FL 34746			ŀ	83			_		
								_	T	
_					84	City		FL	85 Zip	Code
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, office or registered agent, or both, in the State of Florida. Such change was auti					ove	named corpo	pration submits this statement for the	purpose of	changing its	registered
office or re agent. I ar	egistered agent, or both, in the State on familiar with, and accept the obligat	of Florida, Si tions of, Sec	uch change was au tion 607.0505, Flor	itnorized ida Statu	by t tes.	ine corporation	n's board of directors. I hereby acce	ot the appoir	iunem as re	gistered
SIGNATURE	,							_		
	Signature, typed or printed name of registered agent		· · · · · · · · · · · · · · · · · · ·	Registered A	Agent	signature required	when reinstating) ADDITIONS/CHANGES TO OF	DATE FICERS AN	D DIRECTO	ORS IN 12
12.	OFFICERS AN	DIRECTO	DELETE	1.1 TITL	I F	-	ADDITIONS/OFFANGES TO SE	TOLKO AIT	Change	Addition
NAME	D Tollman, Stanley S			1.2 NAA		-				
STREET ADDRESS	12 E 49TH ST 24TH FLOORE					ADDRESS				
CITY-ST-ZIP	NEW YORK NY			1.4 CIT	Y-ST	-ZiP				
TITLE	DV		DELETE	2.1 TM	LE				Change	☐ Addition
NAME	TOLLMAN, BRETT G			2.2 NA	ME					
STREET ADDRESS	12 E 49TH ST 24TH FLOOR			2.3 STF	REET	ADDRESS				
CITY-ST-ZIP	NEW YORK NY			2.4 CIT	TY-ST	T- ZIP				
TITLE	D									<b>□</b> \$ 4.55; -
NAME	HUNDLEY, MONTY D		☐ DELETE	3.1 TITI	LE		<u> </u>		Change	☐ Addition
STREET ADDRESS	•		DELETE	3.2 NA	LE ME				☐ Change	☐ Addition
	12 E 49TH ST 24TH FLOOR		☐ DELETE	3.2 NAM 3.3 STF	LE ME REET	ADDRESS			☐ Change	Addition
CITY-ST-ZIP	12 E 49TH ST 24TH FLOOR NEW YORK NY			3.2 NAM 3.3 STF 3.4. CIT	LE ME REET	ADDRESS				
TITLE	12 E 49TH ST 24TH FLOOR NEW YORK NY DP		□ DELETE	3.2 NAM 3.3 STF 3.4. CIT 4.1 TITE	LE ME REET. TY-ST LE	ADDRESS			☐ Change	Addition
TITLE	12 E 49TH ST 24TH FLOOR NEW YORK NY DP HUNDLEY, CHARLES D	#100		3.2 NAM 3.3 STF 3.4, CIT 4.1 TITE 4.2 NA	LE ME REET. TY-ST LE	ADDRESS I- ZIP				
TITLE NAME STREET ADDRESS	12 E 49TH ST 24TH FLOOR NEW YORK NY DP HUNDLEY, CHARLES D 5770 W. IRLO BRONSON HWY	'., #129		3.2 NAM 3.3 STF 3.4. CIT 4.1 TITE 4.2 NA 4.3 STF	LE ME REET. TY-ST LE ME REET.	ADDRESS I				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	12 E 49TH ST 24TH FLOOR NEW YORK NY DP HUNDLEY, CHARLES D 5770 W. IRLO BRONSON HWY KISSIMMEE FL	'., #129	☐ DELETE	3.2 NAM 3.3 STF 3.4, CIT 4.1 TITE 4.2 NA	LE ME REET. TY-ST LE ME REET. Y-ST	ADDRESS I				
NAME STREET ADDRESS CITY-ST-ZIP TITLE	12 E 49TH ST 24TH FLOOR NEW YORK NY DP HUNDLEY, CHARLES D 5770 W. IRLO BRONSON HWY KISSIMMEE FL DS	'., #129		3.2 NAM 3.3 STF 3.4. CIT 4.1 TITE 4.2 NA 4.3 STF 4.4 CIT	LE ME REET. TY-ST LE ME REET. Y-ST	ADDRESS I			Change	☐ Addition
TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME	12 E 49TH ST 24TH FLOOR NEW YORK NY DP HUNDLEY, CHARLES D 5770 W. IRLO BRONSON HWY KISSIMMEE FL DS FREEDMAN, SANFORD	'., #129	☐ DELETE	3.2 NAM 3.3 STF 3.4. CIT 4.1 TITL 4.2 NA 4.3 STF 4.4 CIT 5.1 TITL 5.2 NAM	LE ME REET. LE ME REET. Y-ST	ADDRESS I			Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	12 E 49TH ST 24TH FLOOR NEW YORK NY DP HUNDLEY, CHARLES D 5770 W. IRLO BRONSON HWY KISSIMMEE FL DS FREEDMAN, SANFORD 12 E 49TH ST 24TH FLOOR	'., #129 	☐ DELETE	3.2 NAM 3.3 STF 3.4. CIT 4.1 TITL 4.2 NA 4.3 STF 4.4 CIT 5.1 TITL 5.2 NAM	LE REET, TY-ST LE ME REET, TY-ST LE ME REET, REET,	ADDRESS I-ZIP  ADDRESS -ZIP  ADDRESS			Change	☐ Addition
TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME	12 E 49TH ST 24TH FLOOR NEW YORK NY DP HUNDLEY, CHARLES D 5770 W. IRLO BRONSON HWY KISSIMMEE FL DS FREEDMAN, SANFORD 12 E 49TH ST 24TH FLOOR NEW YORK NY	′., #129 	☐ DELETE	3.2 NAM 3.3 STF 3.4. CIT 4.1 TITE 4.2 NA 4.3 STF 4.4 CIT 5.1 TITE 5.2 NAM 5.3 STF	LE ME REET, TY-ST ME REET, TY-ST LE ME REET, TY-ST ME REET, TY-ST	ADDRESS I-ZIP  ADDRESS -ZIP  ADDRESS			Change	☐ Addition
TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP	12 E 49TH ST 24TH FLOOR NEW YORK NY DP HUNDLEY, CHARLES D 5770 W. IRLO BRONSON HWY KISSIMMEE FL DS FREEDMAN, SANFORD 12 E 49TH ST 24TH FLOOR	′., #129	☐ DELETE	32 NAM 3.3 STF 3.4. CIT 4.1 TITE 4.2 NA 4.3 STF 5.1 TITE 5.2 NAM 5.3 STF 5.4 CIT	LE ME REET, TY-ST LE WME REET, LE LE ME REET, Y-ST	ADDRESS I-ZIP  ADDRESS -ZIP  ADDRESS			☐ Change	☐ Addition

CITY-ST-ZIP **NEW YORK NY** 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, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

4-29-99