SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997.
AMOUNT DUE ON OR BEFORE 9/17/97: $550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: $750.)

FILED
Aug 04 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT
1997

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

DOCUMENT # **P95000093793 (4)**

1. Corporation Name
GELL HOSPITALITY GROUP, INC.

Principal Place of Business	Mailing Address
4760 TAMIAMI TRAIL NORTH SUITE 22 NAPLES FL 33940	4760 TAMIAMI TRAIL NORTH SUITE 22 NAPLES FL 33940

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 11/30/1995
3a. Date of Last Report: 10/02/1996
4. FEI Number: 65-0626445 — 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
7. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☐ No

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

9. Name and Address of Current Registered Agent
DARGAI, LANA K
4760 TAMIAMI TRAIL NORTH
SUITE 22
NAPLES FL 33940

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 Lana Kaye Dargai — Registered Agent — ~~8/28/97~~ 7/28/97
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	LANA KAYE DARGAI D	☐ DELETE
NAME	DARGAI, LANA K	
STREET ADDRESS	4760 TAMIAMI TRAIL NORTH #22	
CITY-ST-ZIP	NAPLES FL 33940	
TITLE	PD	☐ DELETE
NAME	LINDBACK, CHARLES G	
STREET ADDRESS	1202 A SPANISH CAY LANE	
CITY-ST-ZIP	PUNTA GORDA FL 33950	
TITLE	VD	☐ DELETE
NAME	GALY, ALBERT J	
STREET ADDRESS	15161 CEDARWOOD LANE #1101	
CITY-ST-ZIP	NAPLES FL 33963	
TITLE	TD	☐ DELETE
NAME	LINDBACK, JAMES L	
STREET ADDRESS	4061 FOREST POINT DRIVE	
CITY-ST-ZIP	MUSKEGON MI 49441	
TITLE	SD Deceased	☒ DELETE
NAME	EKLUND, JAMES D	
STREET ADDRESS	210 COUNTRY CLUB ROAD	
CITY-ST-ZIP	WHITEHALL MI 49461	
TITLE		☐ DELETE
NAME	Eklund, Robert	
STREET ADDRESS	210 Country Club	
CITY-ST-ZIP	Whitehall, Michigan 49461	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE		☐ Change ☐ Addition
1.2 NAME		
1.3 STREET ADDRESS		
1.4 CITY-ST-ZIP		
2.1 TITLE		☐ Change ☐ Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		
3.1 TITLE		☐ Change ☐ Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		☐ Change ☐ Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		☐ Change ☐ Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE	SD	☐ Change ☒ Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 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 on an attachment with an address.

SIGNATURE: SIGNATURE REQUIRED — 7/28/97 — 941-434-1999

CR2E034 (4/97)