2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P96000082388

1. Entity Name HOSPITALITY ENTERPRISES, INC.

FILED
Jan 22, 2004 08:00 AM
Secretary of State

Principal Place of Business

415 L'AMBIANCE DRIVE PH-D LONGBOAT KEY, FL 34228 Mailing Address

415 L'AMBIANCE DRIVE PH-D LONGBOAT KEY, FL 34228



DO NOT WRITE IN THIS SPACE

5. Certificate of Status Desired

\$8.75 Additional Fee Required

5. Name and Address of Current Registered Agent

SACK, BURTON M 415 L'AMBIANCE DRIVE PH - D LONGBOAT KEY, FL 34228

DO NOT WRITE IN THIS SPACE

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the obligat	named entity submits this statement for the plons of registered agent.	urpose of changing its registered office	or registered agent, or bot	th, in the State of Florida. I am familiar with, and accept	
SIGNATURE_	Signature, typed or printed name of registered agent and title d	applicable. (NOTE: Registered Agent signs	ature required when reinstating)	DATE	
	E NOW!!! FEE IS \$150.00 ay 1, 2004 Fee will be \$550.00	Election Campaign Financing Trust Fund Contribution.	\$5.00 May Be Added to Fees		
10.	OFFICERS AND DIREC	TORS			
TITLE NAME STREET ADDRESS CATY - ST - ZIP	PDCS SACK, BURTON M 415 L'AMBIANCE DR, #PH-D LONGBOAT KEY, FL			U00000010362 01/22/04-80029-010 150.00 ~ 7	
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
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TITLE NAME STREET ADDRESS					

12. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(1), Florida Statutes, I further certify that the information indicated on this report or supplemental report is tree 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 simbowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE:

CITY-ST-ZIP

1/19/04 (941) 383-197