

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
May 07, 1999 8:00 am
Secretary of State

05-07-1999 90073 042 ***150.00

DOCUMENT # P96000085185

1. Corporation Name

NLT GUEST SERVICES, INC.

Principal Place of Business

13928 TALLOWRIDGE CT.
ORLANDO FL 32837

Mailing Address

13928 TALLOWRIDGE CT.
ORLANDO FL 32837

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

10/14/1996

4. FEI Number

59-3365362

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 owes the current year Intangible
Personal Property Tax.

☐ Yes

☒ No

2. Principal Place of Business

21 2091 Derby Glen Drive

2a. Mailing Address

26 2091 Derby Glen Drive

22 Suite, Apt. #, etc.

27 Suite, Apt. #, etc.

23 City & State

Orlando, FL

28 City & State

Orlando, FL

24 Zip

32837

Country

25 USA

29 Zip

32837

Country

30 USA

9. Name and Address of Current Registered Agent

LYTUS, NICOLA
13928 TALLOWRIDGE CT.
ORLANDO FL 32837

10. Name and Address of New Registered Agent

81 Name Nicola Lytus

82 Street Address (P.O. Box Number is Not Acceptable)
2091 Derby Glen Drive

83

84 City Orlando

FL

85 Zip Code 32837

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

Nicola Lytus
Signature, typed or printed name of registered agent and title if applicable.

NICOLA LYTUS

4/26/99

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

☐ DELETE

TITLE D
NAME LYTUS, NICOLA
STREET ADDRESS 13928 TALLOWRIDGE CT.
CITY-ST-ZIP ORLANDO FL 32837

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

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CITY-ST-ZIP

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☒ Change ☐ Addition

1.1 TITLE P/T
1.2 NAME Nicola Lytus
1.3 STREET ADDRESS 2091 Derby Glen Drive
1.4 CITY-ST-ZIP Orlando, FL 32837

☐ Change ☐ Addition

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

☐ Change ☐ Addition

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

☐ Change ☐ Addition

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

☐ Change ☐ Addition

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

☐ Change ☐ Addition

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

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.

SIGNATURE:

Nicola Lytus
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

NICOLA LYTUS/PRESIDENT (407) 438-0548

Date

Daytime Phone #

CR2E034 (11/98)