	DI 540		A. I. (B.)	TO 107/04/6					
				STRUCTIONS BEFORE AND DEPARTMENT OF STAT Katherine Harris Secretary of State DIVISION OF CORPORATIONS		COMPLETING THIS FORM. E FILEU FILEU FILEU FILEU FILEU FISION OF CORPORATION			
DOC	OCUMENT # P 960000 89110						99 JUL 29 PM 12: 38		
	DAS HOTELS, INC								
410	•			Address 1100 TAMIAMI TR					
POR	PORT CHARLOTTE, FL POIRT CHARLOTTE, FL. 33952						化氯化化物 医乳腺样 医脂腺		
If above addresses are incorrect in any way, line through incorrect information and enter c 2. New Principal Office Address, If Applicable 3. New Mailing Office Address, If Applicable					correction below.	4. Date Incorp	porated or Qualified	197-99	
Suite, Apt.	Suite, Apt. #, etc.			Suite, Apt. #, etc.			ness in Florida / 0	-29-96 	
City & Stat	e	City		,		5. FEI Numbe	0711549	Applied For Not Applicable	
Zip			Zip Coun			CERTIFICAT	CERTIFICATE OF STATUS DESIRED 58.75 Additional Fee required for a Certificate of Status		
7. Names Title(s) 1 PRES DIR SECR	Name	et Addresses of Each Officer and/or Director (FI Name of Officers and/or Directors ANJIBHAI PATEL		Street Address Officer and/or Direct Officer and/or Direct Officer Box HIGO TAMAMI TR		h or City / State / Zip Numbers) 4			
DIR SURESH PATEL				4100 THMIHMI		700002956217-08/10/99-01077-012 ***1050.00 ***1050.00			
Name and Address of Current Registered Agen				ent	9. Name and Address of New Registered Agent			gent	
	NORRIS D WOOLFOCK III 424 W. COLONIAL DR ORLANDO, FL 32804				Street Address (I	P.O. Box Number is Not Acceptable)			
					City POST	CHARLE	State	Zip Code	
Signature of	10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obl Signature of Registered Agent REGISTERED AGENT MUST SIGN					bligations of Section	on 607.0505, F.S. Date 7 - 26 - 9		
	 This corporation owes the current year Intangible Personal Property Tax due June 30. Yes □						(See other side on inlang		
12 I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filling this reinstalement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i). F.S. The information indicate on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.								11 E.S. that all took	
SIGNAT	URE: SIGNATURE AND	JO TYPED OR PRIN	TED NAME OF S	S しん	ESH PATEL,	SECR 7-2	6-99 (94s)	743-2442 brik Phone #	