

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

FILED
May 15 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # P96000089226 (0)

1. Corporation Name
L B V HOTEL GROUPS, INC.

Principal Place of Business

Mailing Address

3956 W. COLONIAL DRIVE
ORLANDO FL 32808

3956 W. COLONIAL DRIVE
ORLANDO FL 32808

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21 5353 CONROY ROAD		26 5353 CONROY ROAD		10/30/1996	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		4. FEI Number	
22		27		59-3411893	
City & State		City & State		5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	
23 ORLANDO, FLORIDA		28 ORLANDO, FLORIDA		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
Zip		Zip		8. This corporation owes or has paid the current year intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	
24 32811		29 32811		Country	
25 ORANGE		30 ORANGE			

g. Name and Address of Current Registered Agent

VALBH, ANIL
3956 WEST COLONIAL DRIVE
ORLANDO FL 32808

10. Name and Address of New Registered Agent

81 Name	
82 Street Address (P.O. Box Number is Not Acceptable)	5353 CONROY ROAD
83	
84 City	ORLANDO
85 Zip Code	32811

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, Sections 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name, title, and address of the agent

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	VALBH, ANIL I	1.2 NAME	
STREET ADDRESS	3956 W. COLONIAL DRIVE	1.3 STREET ADDRESS	5353 CONROY ROAD
CITY-ST-ZIP	ORLANDO FL 32808	1.4 CITY-ST-ZIP	ORLANDO, FLORIDA 32811
TITLE	STD	2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	NANA, AJIT	2.2 NAME	
STREET ADDRESS	3956 W. COLONIAL DRIVE	2.3 STREET ADDRESS	5353 CONROY ROAD
CITY-ST-ZIP	ORLANDO FL 32808	2.4 CITY-ST-ZIP	ORLANDO, FLORIDA 32811
TITLE	VD	3.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PATEL, DIPAK	3.2 NAME	
STREET ADDRESS	1140 N.W. 32ND AVENUE	3.3 STREET ADDRESS	11400 NW 32ND AVENUE
CITY-ST-ZIP	MIAMI FL 32808	3.4 CITY-ST-ZIP	MIAMI, FLORIDA 33167
TITLE	VD	4.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PATEL, ANIL	4.2 NAME	
STREET ADDRESS	1140 N.W. 32ND AVENUE	4.3 STREET ADDRESS	11400 NW 32ND AVENUE
CITY-ST-ZIP	MIAMI FL 32808	4.4 CITY-ST-ZIP	MIAMI, FLORIDA 33167
TITLE	VD	5.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PATEL, KIRAN	5.2 NAME	
STREET ADDRESS	1140 N.W. 32ND AVENUE	5.3 STREET ADDRESS	11400 NW 32ND AVENUE
CITY-ST-ZIP	MIAMI FL 32808	5.4 CITY-ST-ZIP	MIAMI, FLORIDA 33167
TITLE	VD	6.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PATEL, VIJAY	6.2 NAME	
STREET ADDRESS	1140 N.W. 32ND AVENUE	6.3 STREET ADDRESS	11400 NW 32ND AVENUE
CITY-ST-ZIP	MIAMI FL 32808	6.4 CITY-ST-ZIP	MIAMI, FLORIDA 33167

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.

CR2E034 (10/97)