

2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 03, 2008 8:00 am
Secretary of State

01-23-2008 90011 025 ***150.00

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1. Entity Name
RUSKIN COMFORT MOTEL, INC.



Principal Place of Business
**1804 US HIGHWAY 41 SOUTH
RUSKIN, FL 33570**

Mailing Address
**1804 US HIGHWAY 41 SOUTH
RUSKIN, FL 33570**

66002162



01162008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3436123	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**BHAKTA, PRABHAVATIBE
1804 US HIGHWAY 41 SOUTH
RUSKIN, FL 33570**

**DO NOT WRITE
IN THIS SPACE**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	VP
NAME	BHAKTA, PRABVATIBE
STREET ADDRESS	1804 UNITED STATES HIGHWAY 41 SOUTH
CITY-ST-ZIP	RUSKIN, FL 33570
TITLE	T
NAME	BHAKTA, UMESH
STREET ADDRESS	1804 UNITED STATES HIGHWAY 41 SOUTH
CITY-ST-ZIP	RUSKIN, FL 33570
TITLE	PDT
NAME	BHAKTA, PRAVATIBEN
STREET ADDRESS	1804 US HWY 415
CITY-ST-ZIP	RUSKIN, FL 33570
TITLE	VP
NAME	BHAKTA, UMESH
STREET ADDRESS	1804 US HWY 415
CITY-ST-ZIP	RUSKIN, FL 33570
TITLE	S
NAME	BHAKTA, MAYURI
STREET ADDRESS	1804 US HWY 415
CITY-ST-ZIP	RUSKIN, FL 33570
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Umesh Bhakta
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/27/08 (813) 645-4348
Date Daytime Phone #