2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000062928

Title:

Name:

Address:

City-St-Zip:

Entity Name: FLORIDA HOSPITALITY NETWORK, INC.

() Delete

777 EAST ATLANTIC AVENUE

DELRAY BEACH, FL 33483

MILLER, BRYAN D

FILED May 04, 2005 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
P O BOX 846 DELRAY BEACH, FL 33447	777 EAST ATLANTIC AVENUE, STE C2 PMB 330 DELRAY BEACH, FL 33483
Current Mailing Address:	New Mailing Address:
P O BOX 846 DELRAY BEACH, FL 33447	777 EAST ATLANTIC AVENUE, STE C2 PMB 330 DELRAY BEACH, FL 33483
FEI Number: 65-0836978 FEI Number Applied For () F	El Number Not Applicable () Certificate of Status Desired ()
Name and Address of Current Registered Agent:	Name and Address of New Registered Agent:
MILLER, BRYAN D 777 E. ATLANTIC AVE STE Z-330 DELRAY BEACH, FL 33483 US	MILLER, BRYAN D 777 E. ATLANTIC AVE, STE C2 PMB 330 DELRAY BEACH, FL 33483 US
The above named entity submits this statement for the purpoin the State of Florida.	ose of changing its registered office or registered agent, or both,
SIGNATURE: BRYAN D MILLER	05/04/2005
Electronic Signature of Registered Agent	Date
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution ().	
OFFICERS AND DIRECTORS:	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:
Title: PSD () Delete Name: MILLER, E. J. Address: 777 E ATLANTIC AVE City-St-Zip: DELRAY BCH, FL 33483	Title: () Change () Addition Name: Address: City-St-Zip:

Title:

Name:

Address:

City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: BRYAN D MILLER VP 05/04/2005

() Change () Addition