

FILED
May 05, 2003 8:00 am
Secretary of State

05-05-2003 91868 012 ***150.00

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # P98000063880

1. Entity Name

TAMPA BAY RESORTS CORPORATION



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
19117 MANDARIN GROVE PL

3. Mailing Address
19117 MANDARIN GROVE PL

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State
TAMPA, FLORIDA

City & State
TAMPA, FLORIDA

Zip
33647

Country

Zip
33647

Country

4. FEI Number
59-3521904

Applied For
Not Applicable

5. Certificate of Status Desired \$8.75 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name GOHIL KISHORSINH B

Street Address (P.O. Box Number is Not Acceptable)

773 POWDER HORN ROW

City LAKELAND

FL Zip Code
33809

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution.

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	TIPNIS, VICTOR C 19117 MANDARIN GROVE PL TAMPA FL 33647	DIRECTOR	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PATEL DHIRU Z 20500 BALIRMOORE STREET CHATSWORTH, CA 91311	DIRECTOR	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	GOHIL KISHORSINH B 773 PWDER HORN ROW LAKELAND, FL 33809	DIRECTOR	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PATEL PRAKASH V 8297 LOMA VISTA RD VENTURA, CA 93004	DIRECTOR	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PATEL DEEPAK V 10201 MASON AVENUE #123 CHATSWORTH, CA 91311	DIRECTOR	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PATEL CHHOTU V 19117 MANDARIN GROVE PL TAMPA, FL 33647	DIRECTOR	TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. 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 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 on an attachment with an address, with all other like empowered.

SIGNATURE:

David

SIGNATURE AND PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

4-28-03

Daytime Phone #

CR2E034B (12/02)