2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 03, 2001 8:00 am
Secretary of State
05-03-2001 91098 025 ***158.75

DOCUMENT # P98000080452

1. Entity Name
HOSPITALITY INVESTMENTS II, INC.

Principal Place of Business	Mailing Address
2801 EAST NEW YORK AVENUE DELAND FL 32724	2801 EAST NEW YORK AVENUE DELAND FL 32724

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

DO NOT WRITE IN THIS SPACE

4. FEI Number NOT APPLICABLE [X] Applied For [ ] Not Applicable

5. Certificate of Status Desired [X] $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

GLAVIN, GRACE ANNE
2801 EAST NEW YORK AVENUE
DELAND FL 32724

7. Name and Address of New Registered Agent

Name Rosemary Ann Barone Ortiz
Street Address (P.O. Box Number is Not Acceptable) 2801 E. New York Avenue
City Deland, Florida FL Zip Code 32724

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

SIGNATURE [signature] / Rosemary Ann Barone Ortiz V.P/Treasurer 4/27/01
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) [X]

FILE NOW!!! FEE IS $150.00
After MAY 1, 2001 Fee will be $550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. [ ] $5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE	D	[X] Delete
NAME	MALKUS, CHARLES J	
STREET ADDRESS	2801 EAST NEW YORK AVENUE	
CITY-ST-ZIP	DELAND FL 32724	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		[ ] Delete
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		[ ] Delete
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		[ ] Delete
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		[ ] Delete
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		[ ] Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	President	XX Change [ ] Addition
NAME	Vincent Albert Ortiz	
STREET ADDRESS	2801 E. New York Avenue	
CITY-ST-ZIP	DELAND, FLORIDA 32724	
TITLE	V. President/ Treasurer	XX Change [ ] Addition
NAME	Rosemary Ann Barone Ortiz	
STREET ADDRESS	2801 E. New York Avenue	
CITY-ST-ZIP	Deland, Florida 32724	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		[ ] Change [ ] Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		[ ] Change [ ] Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		[ ] Change [ ] Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		[ ] Change [ ] Addition

CR2E034 (10/00)

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: [signature] / Rosemary Ann Barone Ortiz 4/27/91 (386) 736-3440
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #