

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 26, 2006 08:00 AM
Secretary of State

DOCUMENT # P98000092025

1. Entity Name
JAGUAR HOTELS, INC.



Principal Place of Business
2535 S.R. 16
ST. AUGUSTINE, FL 32092

Mailing Address
2535 S.R. 16
ST. AUGUSTINE, FL 32092



03302006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number **59-3555634** Applied For Not Applicable
 5. Certificate of Status Desired **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

PATEL, AMI R
2535 S.R. 16
ST. AUGUSTINE, FL 32092

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

Ami Patel

4-3-06

FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$350.00

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

10. OFFICERS AND DIRECTORS

TITLE	PO
NAME	PATEL, RAMU S
STREET ADDRESS	2535 S.R. 16
CITY-ST-ZIP	ST. AUGUSTINE, FL 32092
TITLE	DST
NAME	PATEL, RAMILA R
STREET ADDRESS	2535 S.R. 16
CITY-ST-ZIP	ST. AUGUSTINE, FL 32092
TITLE	D
NAME	PATEL, SNEHAL R
STREET ADDRESS	2535 BR 16
CITY-ST-ZIP	ST. AUGUSTINE, FL 32092
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

00000536719
 05/08/06-80103-018 150.00

DO NOT WRITE 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: *Snehal Patel* **SNEHAL R. PATEL**

4-3-06 **904.825.6745**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date Day-Time Phone #