**FILED** 

Mar 02, 1999 8:00 am Secretary of State

03-02-1999 90137 018 \*\*\*150.00

## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # **S74253**

1. Corporation Name

FLORIDA HOSPITALITY SERVICES, INC.

Principal Place of Business Mailing Address							. I CAMPINAL ILI IMBIL MINIM JIMBI METOW JILI	, 81811 818	,	#11 WIW)	i Atus inni
501 E. CAMINO	REAL	501 E. CAMINO REAL	501 E. CAMINO REAL								
BOCA RATON FL 33432-6127 BOCA RATON FL 3343.			<b>132-6127</b>				DO NOT WRITE IN THIS SPACE				
							3. Date Incorporated or Qualifed	IMISS	PACE		
							08/19/1991		,		
2 Principal P	lace of Business	2a, Mailing Address					4. FEI Number		$\neg \Box$	Appli	ed For
Z. Fillicipal F	lace of Busiliess	26					65-0301371		H		pplicable
Suite, Apt.	# etc	Suite, Apt. #, etc							\$8.7	_	ditional
22	,, 5.6.	27					5. Certifcate of Status Desired		Fee	Requ	iired
City & Stat		City & State					6. Election Campaign Financing		\$5.0	00 м	ay Be
23		28					Trust Fund Contribution		Add	ed to I	Fees
Zip	Country	Zip	Coi	untry			8. This corporation owes the current y				_
24	25	29	30				Personal Property Tax.		Yes		]No
	9. Name and Address of Curre	nt Registered Agent		<del> </del>			10. Name and Address of New Regis	tered A	gent		
VI EI	N DONALD LECO			81	Name						
KLEIN, RONALD J ESQ SACHS & SAX, P A				82	Street Address (P.O. Box Number is Not Acceptable)						_
	YAMATO ROAD, STE. 4150			_			<u>.                                    </u>				
	CA RATON FL 33431			83							
500	A PATON I C 30431			84	City		<del></del>		85 2	ip Co	de
				<u>L</u>	<u> </u>			<u> </u>			-i-t-rod
office or r	egistered agent or both in the State	of Florida. Such change v	was authorize	d bv	the corpo	corpor oration	ration submits this statement for the purp 's board of directors. I hereby accept the	appoin	nanging tment a:	regis	stered
agent. I a	m familiar with, and accept the oblig-	ations of, Section 607.050	5, Florida Sta	tutes	- '						
SIGNATURE			and the state of				D. D	ATE			
	Signature, typed or printed name of registered age	ont and title if applicable.  ND DIRECTORS	(NOTE: Registere		n signature r	requirea v	ADDITIONS/CHANGES TO OFFICE		DIREC	CTOR	S IN 12
TITLE	D	DELE"		_		D	esident		X Chan		Addition
NAME	GLENNIE, MICHAEL F.	<u></u>		IAME							
STREET ADDRESS	FOA E CAMINO DEN		1		T ADDRESS		ennie, Michael F.				
	BOCA RATON FL			ITY-5			1 E Camino Real				
CITY-ST-ZIP TITLE	- BOOK WHON TE	☐ DELE				BC	oca Raton;. FL 33432		Chan	ge	Addition
NAME			2.2 N	IAME							
STREET ADDRESS			2.3 S	TREE	ADDRESS						
CITY-ST-ZIP			- 1	CITY-S		ľ					
TITLE		☐ DELE							[] Chan	ge	Addition
NAME			3.2 N	IAME							
STREET ADORESS			3.3 S	TREE	T ADDRESS						
CITY-ST-ZIP			3.4.6	CITY-9	91 <b>5</b> -73	ļ					
TITLE		☐ DELE	TE 411	TILE					Chan	ige	Addition
NAME			4. 2	VAME.							
STREET ADDRESS			4.3 9	TREE	TADDRESS						
CITY-ST-ZIP			4.4 0	ITY-S	T-21P						
TITLE		☐ DELE	TE 5.1 T	TTLE			_		☐ Chan	ige	☐ Addition
NAME				AME		1	·				
STREET ADDRESS					TADDRESS						
CITY-ST-ZIP				TY-S	T-ZIP	<u> </u>					
TITLE	_	☐ DEFE.							☐ Chan	ge	☐ Addition
NAME				IAME							
	l .		<b>■</b> 620	TOCC	PPERMAT	1					

14. 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 annual report or supplemental annual 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 employered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

CITY-ST-ZIP

SIGNATURE AND TYPED ON AGINE OF BIGNAND SETUPL SADIRE FOR SICENT

564/447=3091