

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

FILED
Jun 01 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **S88442** (6)
1. Corporation Name
TOWN AND COUNTRY MOTEL, INC.



Principal Place of Business
**150 NW 35 CT
OAKLAND PARK FL 33309**

Mailing Address
**150 NW 35 CT
OAKLAND PARK FL 33309**

NEW ADDRESS
**2106 N.E. 56 CT. apt # 209
FORT Lauderdale FLA. 33308**

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		25. Mailing Address		3. Date incorporated or Qualified 10/21/1991	
21 Suite, Apt. #, etc.		26 2106 N.E. 56 CT.		4. FEI Number 59-3088686	
22 City & State		27 APT # 209		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
23 Zip		28 FORT Lauderdale FLA.		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
24 Country		29 33308		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
25 Country		30 BROWARD			

9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	
FORTIER, REJEAN J. 150 NW 35 CT OAKLAND PARK FL 33309		81 Name	
NEW ADDRESS 2106 N.E. 56 CT. apt # 209 FORT Lauderdale FLA. 33308		82 Street Address (P.O. Box Number is Not Acceptable)	
		83	
		84 City	
		FL 85 Zip Code	

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P	1.1 TITLE	PRESIDENT
NAME	FORTIER, REJEAN J.	1.2 NAME	Rejean J. Fortier
STREET ADDRESS	150 NW 35 CT	1.3 STREET ADDRESS	2106 N.E. 56 CT. apt # 209
CITY-ST-ZIP	OAKLAND PARK FL	1.4 CITY-ST-ZIP	33308
TITLE		2.1 TITLE	
NAME		2.2 NAME	
STREET ADDRESS		2.3 STREET ADDRESS	
CITY-ST-ZIP		2.4 CITY-ST-ZIP	
TITLE		3.1 TITLE	
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	000002542590
STREET ADDRESS		5.3 STREET ADDRESS	-06/01/98--01082--035
CITY-ST-ZIP		5.4 CITY-ST-ZIP	***150.00
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

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 empowered 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.

SIGNATURE: **Rejean J. Fortier** 4/30/98 954-492-88 99

CR2E034 (10/97)