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

**PROFIT CORPORATION** ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # BUDGET INNS OF PENSACOLA, INC.

(4)

## **FILED** May 01 1998 8:00am Secretary of State



					8 8   8  <b>2   6 8  </b> 8 8   8 8   188
Principal Place of Business Mailing Address					
8911 PENSACOLA BLVD 4300 BAYOU BLVD.					
PENSACOLA FL 32505 US		SUITES 12 & 13 PENSACOLA FL 32503		DO NOT WRITE IN THIS SPACE	
		US		3. Date Incorporated or Qualified	
				05/15/1992	
2. Principal Place of Business		2a. Mailing Address		4. FEI Number	Applied For
21		26		59-3138119	Not Applicable
Suite, Apt #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
22		27			Fee Required
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be
<b>Z</b> io	Country	28     Zip	Country	Trust Fund Contribution	Added to Fees
24	25	<b>⊢</b>	io	<ol><li>This corporation owes or has paid the Personal Property Tax due June 30.</li></ol>	Current year intangible ☐ Yes ☐ No
24	9. Name and Address of Currer		NO 1	10. Name and Address of New Register	
FI	EMING, EDWARD P.				
	00 BAYOU BLVD, STE.S 12 & 1	3	OD Charat A	diama (D.O. Barratiania in Managarata)	
PENSACOLA FL 32503			82 Street A	ddress (P.O. Box Number is Not Acceptable)	
83					,, <u>,</u>
			24 59		
			84 City	F	85 Zip Code
11. Pursuant to the provisions of Soctions 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					
Signature, typed or printed name of registered agent and title it applicable (NOTE: Registered Agent signature required when reinstaling)  DATE					
12.		ID DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS A	
TITLE	PTD	☐ DELETE	1.1 TITLE		☐ Change ☐ Addition
NAME	PATEL, ANIMESH M		1.2 NAME		
STREET ADDRESS	6911 PENSACOLA BLVD.		1.3 STREET ADDRESS		
CITY-ST-ZIP TITLE	PENSACOLA FL 32505 VPS	DELETE	1.4 CITY - ST - ZIP		Change Addition
NAME	NATHUBHAI, RAMAN	_ better	2 1 TITLE 2 2 NAME		CT Change CT Addition
STREET ADDRESS	6911 PENSACOLA BLVD		23 STREET ADDRESS		
CITY-ST-ZIP	PENSACOLA FL 32505		2.4 CITY-ST-ZIP		
TITLE	0	☐ DELETE	3.1 TITLE		Change Addition
NAME	PATEL, MADHU		32 NAME		
STREET ADDRESS	6911 PENSACOLA BLVD.		3.3 STREET ADDRESS		
CITY-ST-ZIP	PENSACOLA FL 32505		3.4. CITY-ST-ZIP		
TITLE	D	☐ DELETE	4.1 TITLE	<del> </del>	Change Addition
NAME	RAMAN, BHANU HIRA		4.2 NAME		
STREET ADDRESS	6911 PENSACOLA BLVD.		4.3 STREET ADDRESS		
CITY-ST-ZIP	PENSACOLA FL 32505		4.4 CITY-ST-ZIP		
TITLE		☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME	•	
STREET ADDRESS			5.3 STREET ADDRESS		
CITY - ST - ZIP			5.4 CITY-ST-ZIP		
TITLE		☐ DELETE	61 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			63 STREET ADDRESS		
CITY - ST - ZIP			6.4 CITY-ST-ZIP		

indicated on this annual report or supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the informatic indicated on this annual report or suppliemental 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.

Animesh K. Patel 4/24/98

(850)479 - 3800