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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # V46369

(7)

SANDI SHORES MOTEL, INC.

FILED Feb 17 1997 8:00am Secretary of State

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Principal Plac	ce of Business	Mailing Address 3008 BAYSHORE DR FT LAUDERDALE FL 33304-4209			f (Ne)s within dinin Ariah disib misin minit dinis minit man ainti aras and sans					
3008 BAYSHO										
FT LAUDERDA	ALE FL 33304	FI LAUDE	HUALE PL 3331	J9-42UH						
					•		3. Date Incorporated or Qualified 06/22/1992	3a. D	ate of Last Re / 29/1996	aport
2. Principal F	Place of Business	2a. Mailing	g Address				4. FEI Number 65-0347594			plied For t Applicable
Suite, Apt.	. #, etc.	Suite,	Apt. #, etc.				5. Certificate of Status Desired		\$8.75 / Fee Re	
City & Stal	te	City &	State				6. Election Campaign Financing		\$5.00	
23		28			;		Trust Fund Contribution		Added t	
Zıp	Country	Zip		Countr	У.		8. This corporation has liability for			199.032
24	25 25 9. Name and Address of Curre	29	Lant	30	<u></u>		Florida Statutes 10. Name and Address of New Re	Yes		···
DA1		aur weðisteren v	(gent	81	, , , , , , , , , , , , , , , , , , ,	Name	(U. Natile Bild Addies 2 Of Hear Fee	Alecelon	Main.	
	MOUTAR, SAMARU				1_					
	08 BAYSHORE DR LAUDERDALE FL 33304			82	! :	Street Addr	ddress (P.O. Box Number is Not Acceptable)			
ГІ	ENOUGHDALE PE 33304			83	<u>;</u>					***************************************
			•		_	<u></u>				
				84	'	City		FL	85 Zip (Dode
agent. I a SIGNATURE	registered agent, or both, in the sta am familiar with, and accept the obli- Signature, typed or printed name of registered a	gations of, Section	on 607.0505, F	lorida Statute	35.		tion's board of directors. I hereby acce	DATE	politilien as	registered
12.		ND DIRECTORS	······································	13.	+		ADDITIONS/CHANGES TO OFFIC	ERS AN	D DIRECTOR	S IN 12
TITLE	PD		DELETE	1.1 TITLE					Change	Addition
NAME	RAMOUTAR, SAMARU			1.2 NAME						
STREET ADDRESS				1.3 STREE	TAI	DDRESS				
CITY-ST-ZIP	FT LAUDERDALE FL			1.4 CITY-		ZIP			T 100	1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2
TITLE	D DODAH NO		DELETE	2.1 TITLE		1	•		Change	Addition
NAME	MOTILAL, ROSALIND			2.2 NAME			45			
STREET ADDRESS	3008 BAYSHORE DR FT LAUDERDALE FL			2.3 STREE	- 1					
CITY-ST-ZIP TITLE	FI DODENDALE IE		DELETE	2. 4 CiTY 3.1 TITLE		- 217			Change	Addition
NAME				3.2 NAME					•	
STREET ADDRESS				3.3 STREE	- 1	DDRESS				
CITY-ST-7:P				3.4, CITY	- \$T -	- ZIP	•			
TITLE			DELETE	4.1 TITLE	-				Change	Addition
NAME				4. 2 NAM	E:					
STREET ADDRESS				4.3 STREE	ET,AI	DDRESS				
CHY-SI-ZIP				44 CiTY-		ZIP				TT 20.00
TITLE			DELETE	5 1 TITLE					Change	Addition Addition
NAME				5.2 NAME			•			
STREET ADDRESS				5.3 STREI						
CITY+ST-ZIP			DELETE	5.4 CITY- 6.1 TITLE	~~	- ZIP			Change	Addition
TITLE			OLLLIL	6.2 NAME		1			Jillings	
NAME STORET ANNBESS				6.3 STREI		DORESS				
STREET ADDRESS				6.4 CITY			•			
CITY-ST-ZIP	1			0.9 0.111		- att a - a - a - a	die Castina 440 07(2)(i) Florida Cratit			the

14. I do 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

ABTUAL KOSAKIAN
SCHATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

0/12/97

954-728-8649