

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L96000001161

FILED
Jan 09, 2004
Secretary of State

Entity Name: EUROPEAN HOTELS REPRESENTATION, L.C.

Current Principal Place of Business:

800 WEST AVENUE SUITE 335
MIAMI, FL 33139

New Principal Place of Business:

Current Mailing Address:

800 WEST AVENUE SUITE 335
MIAMI, FL 33139

New Mailing Address:

FEI Number: 65-0707310

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

EDELSTEIN, STEVEN A
1200 ANASTASIA AVENUE SUITE 300
CORAL GABLES, FL 331346364 US

Name and Address of New Registered Agent:

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: MGRM () Delete
Name: MARANZANA, DAVID
Address: 800 WEST AVENUE SUITE 335
City-St-Zip: MIAMI BEACH, FL 33139

Title: MGRM () Delete
Name: RHI REPRESENTACIONES, HOTELERAS INT E RNACION
Address: 800 WEST AVENUE STE 335
City-St-Zip: MIAMI BEACH, FL 33139

Title: MGRM () Delete
Name: SUERETH, FRANCESCA
Address: 800 WEST AVENUE SUITE 335
City-St-Zip: MIAMI BEACH, FL 33139

Title: MGRM () Delete
Name: PALMADA, JUAN
Address: 800 WEST AVENUE STE 335
City-St-Zip: MIAMI BEACH, FL 33139

Title: MGRM () Delete
Name: CIACCIO, GAETA NO D
Address: 800 WEST AVENUE STE 335
City-St-Zip: MIAMI BEACH, FL 33139

Title: MGRM () Delete
Name: CIACCIO, ANDREA D
Address: 800 WEST AVENUE STE 335
City-St-Zip: MIAMI BEACH, FL 33139

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
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Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: DAVID MARANZANA

MGRM

01/09/2004

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date